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EROGENOUS MATURATION *

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The theory of adolescent sexuality, as reflected in psychoanalytic writings, is in an unsatisfactory condition. One may summarize the doctrine of the male as the displacement by castration fear, of the phallic phase of infantile sexuality with as a result the latency period; also the genital localization by displacement from the other erogenous zones. This is highly plausible; it is an interpretation which would be accepted by almost any patient when confronted with the necessity of "explaining" (finding a causal series in) the vague recollections of events and the unclear affective experiences, which they bring up by free association from the period of early childhood. As in case of the "law" of talion expectation, there is a good deal behind the doctrine—quite enough to insure the experience of belief in dealing with retrospective phantasy to fill gaps in the associational material. In the therapy of the psychoneuroses, there is no acute need for a more precise formula. In the graver psychoses, however, where demonstrations of actual ontogenesis are seen, one feels the need for an explanation, not in sketchy outline, but in full—a fundamental hypothesis of sexuality.

Research in mental dynamics must have regard always for the dimension of *time*. The most appalling errors enter our speculations upon disregard of this factor. While a datum without its setting is generally of little value, a datum without notation of its place

*A note on the genesis of adolescent male sexuality; a part result of the study of schizophrenic motivation in progress in the clinical research service of the Sheppard and Enoch Pratt Hospital: read before the Washington Psychoanalytic Society meeting at Saint Elizabeths Hospital July 11, 1925.

in the time series may easily prove subversive of scientific and of therapeutic results. In genetic psychology, the time factor must be perceived to include within its scope not alone the concatenation of external events, but also the progress of interior developments. Besides the psychological considerations—the growth and expansion of affective, cognitive, and conative assets—we must give full attention to the elaboration of end-organs, neural conducting systems, myelinization of nerves, morphological tectonic developments within the nervous system, and functional evolution of the endocrine organs.

Likewise, we must wean ourselves of several theories, among which, I think, may be included that hypothesis of Edinger which denies to the palae-encephalon any sort of "consciousness." This conclusion, which was derived from the observation of schizophrenics, has received support from some cases of encephalitis. Furthermore, I am advised by Prof. Knight Dunlap that he has come to a similar conclusion from his current studies in cerebellar functions. While it would seem that we are safe in the assertion that, for anything approximating the adult type of "content," we must look to the instrumentality of the ne-encephalon; we cannot exclude the fact that elements devoid of such basis are present; and that, without necessarily the intervention of grave disorder, conditions arise in which such elements are conspicuous.

Some of the tentative conclusions from the work with schizophrenics, and the hypothesis which has derived from them, have so close a bearing on our subject as to justify discussion. Since they depart somewhat from the traditional psychology, a few terms need definition. "Mental life," as it is used here, may be restricted in its reference to those higher forms of organisms which have a central integrating system, but no further. "Symbol activity" is a complete descriptive definition of mental life: the activity of a central integrating apparatus must in part at least consist in symbol activity—a functioning in which *abstracts of the total situations play a kinetic rôle* in the integrating apparatus, and therefore in total organism. There are no grounds for considering anything other than these symbol activities as mental life. As held by the *Gestalt* school, the afferent, central, and efferent parts of the integrative apparatus are a functional unity; an event "in one part of the central nervous system" is an event throughout the organism—it includes as a necessary part the preëxisting total situation, and its concomitant alterations. I take over, with a modification perhaps repugnant to its author, the explanation by Köhler of the interrelation of physical, physiological, and psychological configurations, advancing as an

hypothesis, the following: The occurrence of total situations involving the organism and environment, when suitable, lead through end-organ excitation to configurations of a physicochemical nature within the central integrating apparatus (these being, quite probably, of the nature of ionic partitions about semi-permeable membranes), which configurations in effect constitute the psychological configurations of the first order, the primitive psychobiological symbols. The elaboration of these primitive symbols, we cannot follow in parallel in physiological aspects.¹

Dependent upon the functioning level of the organism's integration (between, as poles, the extremes of ne-encephalic and of palae-encephalic), the "consciousness of the event" occurs in symbol situations the primitive items of which are of various types, which type determines in a relatively direct way the limit of elaboration. In other words, if the organism is functioning at, say, palae-encephalic level "P," characteristics of an event will not be elaborated beyond a comparable degree to which we may refer as P'. If these survive in the time-mnemonic (memorial) series of the organism, and the function level later rises to, let us say, ne-encephalic level "E," the symbols of P' type may be further elaborated to an E' type, and as such enter the time-mnemonic series. If now the organism relapses to the "P" state, the symbols of the P' type may be active, but not those of a higher degree of elaboration, *e.g.*, E'. Under certain conditions, however, when the level of activity is not of the highest, lower order symbol activities may coexist with those of a higher type.

As another aspect of the level of integration, we see that above a certain level, say "I," there are *only mental* evidences of each superior stage; below that level, there are also progressively more evident somatic manifestations, so that at, say, level "L" that reduc-

¹This hypothesis should not be assumed to imply "parallelism," "double-aspect," "interactionism," epiphenomenalism, or other doctrinal affiliation. The notion can be expressed approximately in the following loose language. Phenomena in the sensor apparatus lead to central physiological configurations which occur in (to indicate rough levels of integration), (c) the ponto-medullary, (g) the ponto-cerebellar, (n) the mid-brain, and (t) the cortical zones. These configurations might be described as events including electrical processes extended in time and in a highly individual space. The psychobiological configurations of the first order might then be described as events including an element of the space (in which the "highest radiation" of the sensory phenomena is extended) and a characteristic extension in a highly individualized time—a discrete series constituting what I call the "time-mnemonic series" of the organism, related to the "pure memory" of Bergson.

tion in irritability or raising of the sensory threshold seen in deep reverie, is an invariable concomitant; and at level "O," the physical phenomena of deep sleep make their appearance. These considerations apply to the *completely* integrated organism; they are subject to the effects of dissociation, in which there is no longer a complete integration, and more or less of functional independence in some of the integrative apparatus. Such states are seen, preëminently, in sleep with dreams, and in schizophrenia. How much of dissociation is implied by functional appearance of lower order symbols in "consciousness" of a higher order—*e.g.*, P' symbols coexisting with E'—is a matter on which data are needed.

With these explanations, we may pass to the consideration of the genesis of adolescent sexuality.

Starting with the newborn infant, we come at once to the popular idea that he is devoid of "consciousness." If, without *ad hoc* decision, we recall that affective phenomena, in their more objective manifestations (alterations in pulse rate and volume, respiration rhythm disturbances, variations in the electrical resistance of the body), disappear in profound sleep and under anesthesia, and not otherwise, we may perhaps regard the reactions of the newborn as evidence of an order of consciousness. By the more devious route of inference, I decided that intrauterine experience occurred, constituting itself as precepts (*Vide* "The Oral Concept," *PSYCHOANALYTIC REVIEW*, XII, 1925, pp. 31-38) which were evident in later life as "causes." Assuming, then, that the newborn does have consciousness of a phenomenological level of say, "T"; we would assign to the intrauterine level, "V," the elaboration of primordial symbols of, for example, excitations pertaining to the oral zone, and to that of the prostatic urethra. It may be recalled, in this connection, that the researches of Doctors Tilney and Casamajor (*Archives of Neurology and Psychiatry*, XII, 1924) concerning myelinization of the nerves pertaining to the area concerned, has provided remarkable confirmation of my earlier result derived from psychological observations.²

²I am indebted to Dr. Wm. A. White for calling my attention to an investigation by Dr. Frederick Peterson, in which the fetal reactions to powerful sensory stimuli applied to the abdominal wall of the mother, were studied. The report of this work has not yet been located. I take this opportunity, however, to refer to Doctor Peterson's "The Beginnings of Mind in the New-Born," *Bulletin of the Lying-in Hospital of the City of New York*, 1910: in this paper are tabulated observations on over one thousand newborn children. These early behavior studies gave results in complete harmony with my conclusions.

Since our present consideration culminates in the adolescent personality, we must include not only the important "urethral preconcept" and the evolving urethral complex, with attention to the supporting neural apparatus; but the whole field of erogenous zones, wherever encountered.

For some time after birth, there is an increasingly great part of the waking life devoted to the satisfaction of sensory impulses. The partition of this activity is determined in part by the degree of maturation of the end-organs; in part by the efficiency of motor pathways and coördinating apparatus; and in part by the nature of the spatial and other symbols at the time available. The oral zone integument is unquestionably preëminent for a time; I doubt if the oral complex is ever displaced from a position of very great importance in the personality. The visual-spatial probably follows. The exact temporal sequence here is somewhat variable among individuals. Purely sentient visual aspects begin very early; the primitive elaboration of "object and ground" comes distinctly later. In the latter connection, there is to be considered the "space perception" factor derived quite largely from coördinated activity of the two eyeballs, function of which may be absent for some little time after birth. The end-organs of the cochlear division of the VIII nerve are functionally effective at birth, but the middle ear cavity is usually filled with fluid, so that auditory stimuli (other than a few through conduction by the cranial bones) come as a novel form of experience. These sketchy references may indicate the need for careful work to establish the course of interest development in the first two months of extrauterine life.

While the cord, in all its afferent pathways, seems to be myelinated at birth, and such is probably the case with the great body of peripheral sensor nerves, we are without precise information as to the maturation of tactile end-organs (some of which—*e.g.*, the genital nerve corpuscles of Krause—are of great interest to us). While we are sure that, at birth, the neural apparatus of the V nerve is so myelinated as to provide prompt and clear-cut phenomenal bases for psychological elaboration, and that of the VII nerve sufficiently to provide expressive enervation, we cannot now proceed from neurological genesis to behavior genesis in the matter, for example, of fingers, toes and genitals.

Observational study of the infant shows oral satisfactions of all sorts, at first. As soon as may be, the thumbs become objects of sucking. There are no absolute data on their sensory condition at

that time. Not later than the fourth month, in some cases, kinesthetic rhythmical activities are clear-cut pleasure sources. How much the vestibular input enters into this is not determined. The case of infant "M," who, at the age of six months, stood clinging to the foot of his crib and oscillated his trunk in a somewhat rough accompaniment to musical stimuli, is highly suggestive as to the state of the deeper brain apparatus for coördinating several sensory influxes. By the age of eight months spatial-kinesthetic symbols, coexisting with definite proprioceptive functioning of the upper extremities, secure the toes for sucking pleasure. Needless to say, procedures of pulling and manipulating anything available have appeared some time since. From this, we can assume extensive consciousness of sensory input from the upper extremities and, probably, maturation of the finger end-organs. The genitals now come in for an unusual share of attention. Just what this means is not entirely obvious.

The bone structures, in their function of geometric fixation, dictate a facility in reaching the genitals and, similarly, the umbilicus.

Now, it actually happens that pleasure seeking concentrates in many cases upon these remnants of the umbilical cord, and that this vies with the penis or vulva as an object for manipulation. Such umbilical interest often continues for years: once recognized, one has no difficulty in bringing up extensive recollection of it, in a proportion of patients. The atrophying structures of the umbilicus certainly have no such prepotent sensory equipment as have the genitals, yet it is an object of extensive and quite sustained interest. The question naturally arises: Is the sensory influx from manipulations of the genitals of an especially high order in the first year of extrauterine life? If it is not, an inhibition concerning manipulations in this zone during that period is *quite different* from a later repression.

There are several other points which come up for consideration in this connection. Two "unusually intelligent" infants show behavior which suggests much more than a simple relation concerning their genital manipulations. "F.," who first shows fatigue by resuming thumb sucking, always manipulates the genitals when about to urinate and immediately thereafter, and manipulates the umbilicus by preference at other times. "M.," who from the age of ten months showed fatigue first by genital manipulations, has from the twelfth month at times thrust the left thumb into the mouth while reaching for and grasping the penis with the right hand. The movements are excellently coördinated in time. A month later he began such

manipulations of the penis through the napkin, which he had done previously only when undressed. Here we see, in addition to the obvious return to more primitive and undifferentiated pleasure sources when interest in more elaborated activities has waned, a group of behavior phenomena which should not be ignored in the genetic study of sexuality. We should know, for example, just what relation in M.'s mind the sucking of the thumb had to the synchronous genital manipulation. It may not be beside the point to mention that he had previously been restrained from thumb sucking by the use of a device restricting upward inward movements of the forearms. This had been abandoned owing to a vaccination. Also, efforts had been made by his parents to discourage him from play with the penis—this by words and facial expressions. He had, in all likelihood, come to know that the thumb sucking was also disapproved in its later period of manifestation. The additional datum, that the double performance often took place when he knew himself to be observed, seems to me to represent a reaction comparable to that of the adult who determines to “get all he can while the getting is good”—the getting in his case pertaining to especially high-value pleasure. Without digressing to take up the other major systems in this infant personality, let us see what we can make of this high-value pleasure from genital manipulations.

One thing that it is not, is a close correlate of adult sex excitement—those sensory influxes which have their origin in the end-organs of the prostatic urethra, vesicles, and ejaculatory ducts. The distension of this part of the urethra by the extruded urine, originally a stimulus for a lower segment reflex activity which, at a given threshold value, led to inhibition of tone of the sphincters, and thus a release of the bladder contents, has in several of the higher mammals been provided not only with extensive palae-encephalic but with cortical connections. An illustration of this higher control by complicated symbol activities in the case of the horse may be *apropos*. One of these animals, long experienced in spending the night in a stall having nonabsorbent flooring, learned to delay the release of the “post-prandial” urine until immediately after distribution of the absorbent bedding; this behavior was doubly effective, as, occurring while the groom was about, it led to the removal and replacement of the wetted material. Parenthetically, this is a but mediocre example of thinking as seen in these companions of human evolution. In all the higher mammals studied, as in man, we see a semivoluntary activity of musculature—the accelerator urinae, and so forth—when the bladder has been emptied

or, for some other reason, the sphincter closed with fluid remaining in the prostatic urethra. This activity is usually accompanied, in man at least, by acute pleasurable experience. There is some evidence that these centripetal nerve impulses arise as an effect of the contraction of the urethral striped musculature. The same influx is an important constituent of the sexual orgasm in males, a constituent which is very difficult to differentiate, introspectively, from the influx arising in contractions of the vesiculae seminales and the ejaculatory ducts. This is the source of my assertion that the urethral preconcept is the basis of male genital localization. But while it will be obvious how this factor bears upon the evolution of more or less pernicious "urethral erotism" in some cases, and how, if unduly the object of attention from untimely or ill-judged educational influences, it may provide symbols relative to many other impulses, thus constituting the "urethral character," we do not find in it anything having directly to do with manipulation of the penis by the fourteen-months-old child. The case of "F." may be an instance in which the anticipated urination pleasure—recognized fairly clearly as to its spatial origin—combined with the suitability of the part for pulling, and thus temporarily overshadowed the greater attractiveness of the umbilicus.

Another factor which might arrest our attention is the erectile nature of the penis, manifestations of which may appear shortly after birth. My impression is that erections occurring in the first months of extrauterine life are in response not to tactile stimuli but to unknown internal situations. The nature of the sentience, if any, connected with these early erections is another unknown. For that matter, the phenomena in awareness relating to such occurrences even after the functional awakening of the gonads is largely a matter of tactile impressions from the integument of the part, and tension impressions from the musculature and tendonous appendages. It seems as if this erection mechanism was no more a matter for central attention than is the tone of blood vessels or the normal peristaltic action of the small bowel. With all due respect to the neo-behaviorists, who might logically suspect lust of being the central representation of penile erection, I suspect that we are dealing here with a sympathetic-autonomic balance which is under extensive central control—sacral, cerebellar, and at higher levels—but without inner phenomenal components in any level of awareness. The influence of the central control on the limits of this balance are, on the other hand, most important and interesting, but are not immediately in

point.³ We may dismiss consideration of erection as of any import prior to the evolution of awareness of pleasure from the input of the tactile end-organs of the part. Subsequently to this, erection does assume much importance as it occasions a mechanical heightening of sensory input by bringing the end-organs into their position of maximal efficiency. Before this, the subsymbolic or purely physiological pathways and reflex mechanisms by which erection occurs in response to irritations without or within the penis have matured. We thus come to the real *juvenile* masturbation, the lower chronological limit of which, it seems, is about the age of fifteen to eighteen months. To the earlier manipulations we may, somewhat absurdly, it is true, attach the term *infantile masturbation*.

Before the child is much older, certainly by three or four, the opposing influence of erection upon relaxation of the bladder sphincter, coupled with erection in response to overdistention, have originated a symbol elaboration which thenceforth, barring deep repressive "states of awareness," ties the whole into one system.

It is against this juvenile "sexual" system that castration fear or other powerful inhibitory and repressing influences must be brought to bear if the youngster is to be "properly" distorted to meet the parental obsessions about sexual sin. In case the inhibitory influences have been successful in stamping out manipulations of the part *before* the stage of juvenile masturbation, and the processes of maturation do not break down this inhibition fairly early (before the fifth year?) the personality, I believe, is irremediably warped and a fairly normal development of the sexual impulse after puberty is most improbable.

So far we have been preoccupied with the real factors in sexual maturation. Now let us examine the *fictive* elements, to which reference has already been made in remarks about inhibitory and repressing influences. Any symbol without a referent (inherently and simply meaningless—of these, the great majority are words, *e.g.*, "Sin"),

³ This matter of wide variability under different circumstances in the degree of engorgement of the penis—whether erect or flaccid—seems to have fallen so under the influence of the complex of sexual sin as to have been omitted from scientific study. The limiting degree of engorgement bears the relation of a not very complex function to the relatively persistent balance of sexual and inhibitory conation, in addition to the fairly simple relation of engorgement to the momentary symbol activities. The somatic alterations in this connection brought about in schizophrenics by efforts at "psychic castration" deserve very thorough study.

or a symbol the referent of which is actually unknown (again usually propositions in words, derived by means other than symbolic elaboration of primitive abstracts from reality acquired through the instrumentality of the sensory apparatus, and without correlates among such real symbols—*e.g.*, the commonly accepted notion of cause and effect), and symbols the result of fraudulent cognitive operations, those “rationalizations” in which many symbols of reality are so reduced in intensity by conative control exercised by systems of “ideals” and the like, as to fail of elaboration;—these are the more general types of fictive elements entering into personality distortions, particularly in the sexual field.

From the cradle onward, parents, teachers, and social censors combine in impressing upon the individual—by gestures of avoidance and words of mouth—their irrational fear of the penis as an object to be looked at. This naturally impresses upon the infant its signal importance among his bodily appendages. It may be years before his native tendency to *understand* this mysterious importance is swallowed up in repression. In the later radiations of this primordial mystery may be found the roots of that obsessing sexuality so commonly manifested in later life. The irrational avoidance reaction is accepted—copied—but not before the great fiction of fictions has been implanted. This mysteriously important organ is soon decorated with titles. It is “naughty.” The use of its familiar name must be restricted—equally mysteriously—to whispered remarks to the parents. It must not be tinkered with—that is “naughty-naughty,” “bad,” punishable in all too many cases. Just why this is so no child in good society has ever found out, I wager. So here, with mystery upon mystery hung upon this all too tiny and ineffective a protrusion of the anatomy, there is implanted the juvenile (and so utterly irrational) symbol of sexual sin—an infinitely fraudulent fiction, the mother of psychiatry, as necessity is the mother of invention—an illusory keystone in the span of feeble juvenile sex symbols which is to support the tremendous adolescent upheaval: an illusory keystone, moreover, which remains conspicuous even if the span collapses from effects of its factitious presence.

It is from the material of the symbol cadre “Sexual Sin,” that part of another ultra-important fictive system is derived. I refer here to the Oedipus complex. This must be recognized as a distortion, not as a biological development normal to the male child. It is a fraudulent symbol situation the result of multiple vicious features of our domestic culture, the greater number of which can, in turn,

be referred to the working of "Sexual Sin" in the personality of the mother, and often, too, in that of the father. It is not from a preadolescent sexual competition (in any meaningful use of the words) with the father for the mother as a sex object; but from a blind effort at achieving a coherent word representation—especially of the mother and the father—amid the welter of fraudulent attitudes, contradictory motives, and domestic infelicities, that this warped attitude to the father takes origin. With illumination as to the sex act, whatever the time at which the boy appreciates that his father's penis—hideously sinful object—is inserted into the mother, there comes a new and especially destructive addition to these symbols in the form of disgust, hatred, or other negative affect towards the father. It is usually "assimilated" by repression, thus creating a wide breach in the coherency of the youth's symbolic representations of people.

At this point one may ask, How about the much earlier manifestations of hatred of the father? Hatred must not be assumed to be in itself a primitive affect. Something very like it, however, results from a relatively simple coexistence of the affects of anger and fear, both of which we know to be primitive; such, of course, is not the hatred of the adolescent or adult personality, but is it not the hatred of children? That it should appear in relation to the father much more frequently than to the sustaining and satisfying mother does not require any peculiarly subtle explanations. Where the home life is especially stupid, it may readily develop, somewhat later, into jealousy of attentions lavished on the father. This is occasionally seen in the reactions to humans of pet horses, monkeys, and dogs. One cannot retroject adolescent symbolism to distort these cases into sex appeals: Why need we assume an adolescent love basis for the mixture in the child of anger at restraints and restrictions, fear of the superior powers of the parent, and desires for being the center of things? At this point one might go outside of the subject and remark something concerning the allegedly identical Electra complex in girls. I will say only that I believe we have thrust upon woman altogether too many conclusions derived from the genetic study of the male; in fact, the adolescent developments in the female, as now described, clearly include such artefacts, so that we are expected to believe that the vaginal erogeny is due to a regression! Perhaps, if investigation will follow a path among the facts appertaining to the female child, in some such manner as I have tried to indicate in the other case, we shall come to an entirely satisfactory and self-con-

tained hypothesis which will regard the woman's psychology as no more a caricature of the male's than is the mare's a regressive distortion of the stallion's.

The absence of the penis, when this condition in a girl is discovered by the boy child, may make a lasting impression. Particularly is this the case when he is in the stage of juvenile masturbation, and the censoring authorities are making efforts at its eradication. It may then provide a *real* basis for fictive elaborations pertaining to castration which, in turn, accentuates again the malevolent power of the symbol system we name "Sexual Sin." In a fairly large proportion of children the parents have used disciplinary measures which give rise to elaborations of the general nature of the "Law of Talion"; this is unfortunate, indeed, as it delays and perhaps arrests the development of coherent self-consciousness, and paves the way for subsequent hysterical adaptations. In children who have included these talion symbols, their further elaboration under the influence of the powerful sexual sin system may lead to talion expectation of castration or other injury to the penis. Finally, in our hasty survey of this feature, we may refer to the not inconsiderable number of youngsters towards whom frank or feebly disguised threats of castration have been made. So much for true castration complexes, which are not a universal constituent of male psychology.

There appears quite invariably, I think, a biological reaction of defense which is fashionable among anthropoid apes and savages, but with which we have to dispense—we escape anxiety from its denial through the assistance of our tailors. I refer, of course, to that same geometric arrangement of the upper extremities which permits the use of the hands as a shield for the sensitive, usually pendulent, highly valuable if accursed, genitals, which our erect posture and the slowness of evolution have recklessly exposed to noxious physical influences. How the poorly differentiated oral and masturbatory cravings and sadistic impulses of older boys (some chronologically adult) are brought into opposition with this native impulse to protect the genitals, is common experience of schoolboys. These events contribute to a pseudo-castration complex which is the pre-adolescent equivalent of the figurative castration by those of superior power, of which more will be said later.

Before the concluding remarks about adolescent sexuality, we may review the omissions in this consideration of erogeny. Little has been said of the visual field as a pleasure source. The symbol activities in which visual data are elaborated bear so importantly upon

"self-consciousness" and the evolution of the sentiment of self, the ego in its broadest sense, that they must be reserved for subsequent discussion. Those vast fields of symbol-activity related to the cochlear nerve have received some attention in my remarks on fictive symbols. The olfactory zone needs only a reference to indicate the spilling over into even this region of the powerful complex of Sexual Sin. As has been indicated elsewhere, disgust, normally an impulse arising in the oral zone, is "conditioned" into a tremendous inhibitory and repressive dynamism. Of the various tactile and related senses, we must in the end consider any areas which are peculiarly rich in this connection. The external ear, for instance, with its remarkable reflex apparatus which causes irritation in that region very frequently to eventuate in the phenomenon of sneezing, is a definite erogenous zone. In this connection consider the titillation of the pinna, which is a fairly common fore-pleasure or preparatory maneuver to frank or concealed sexual gratification.

The dorsum and lateral aspects of the neck, not so sensitive to touch, none the less are possessed of a peculiar tactile apparatus which renders deeper pressure (biologically a menace to the cervical cord, lower medulla, etc.) a source of considerable affective experience. I judge some masseurs have recognized the erogenous value of this—it is an important part of the equine courtship and, I am told, a zone the recipient of more sadistic concomitant oral sexual activities of some men and women. The structures in the ventral aspect of the neck are too much exposed to permit such differentiation of pleasant tactile impressions in their affective representations; any but the gentlest manipulations stir an affect of fear.

The important kinesthetic-static muscle and tendon apparatus, the exquisitely sensitive plantar end-organs, the vestibular end-organs, and those equipments for the protection of the viscera (ticklishness of the thoracic walls, laterally; the closely correlated motor and sensor cutaneous nerve supply of the abdominal wall, with its intimate relation to the splanchnic afferent equipment); all these must be omitted from the study.

That part of the sensory input via the conus medularis which we have not yet discussed is too important for nominal consideration. More or less directly through the sacral nucleus and via paths accompanying the centripetal fibers from that nucleus, there are provided the central basis for symbol elaborations pertaining not only to the penis, the urethra, vesicles, and ejaculatory ducts, but likewise to the anus, the lower part of the rectum, the root of the penis, perineum,

and medial surfaces of the upper part of the thighs. All these end-organs are more sensitive than the general integument; many of them are exquisitely so. It is therefore no wonder that the cultivation for pleasure of one other of these areas, in addition to part or all of the penis, results in the subordination of the oral complex to what has roughly been called anal erotism. This brings about a great distortion of the total symbol activity, the so-called "anal personality type." Homosexual intercourse *inter femora*, sodomy, perineal masturbatory practices, and several other "perversions," are all procedures dependent upon this conus enervation. When passive, they are *submission* to *genital* pleasure-seeking on the part of the partner. As such they are important in the symbol activities of the pseudo-castration above mentioned. These considerations and the observations of Kempf on behavior among male Rhesus monkeys, suggests a speculative interpretation of such behavior as a submission of the sacral zone to the more potent aggressor, as a protection of the head (and its highly significant oral zone). That this is not merely idle phantasy is indicated by the relative willingness with which bisexual males will submit to sodomy, while they encounter all sorts of resistant symbol activities when they meditate their initial act of fellatio.

Some time, generally late in the seventh or early in the eighth year, there occurs a change in the conative assets of the individual which is fraught with consequences of much importance. As there is no reason for supposing it to be an outcome of preceding symbol activities, it must be regarded as the result of a physiological maturation, but we are still without information as to what neuroglandular development is responsible. From a strikingly self-centered existence, where the groups of world representations pertaining to others are quite without impulses making for a give-and-take attitude, the child is driven by what has been called the contrectation component of the sexual instinct to seek intimate contact with others. Play is altered in its character, and the inner life takes on a greater resemblance to that of the adult. This is preëminently the time when the repressed early juvenile masturbation is reactivated through talk, example, or actual manipulations by a playmate. There being in many cases no practical symbols of woman, other than the mother, and in other cases only those and the badly distorted symbols derived under parental guidance from the sisters; and the girls of the environment being anything but a close approximation to these available symbols (which are, of course, largely complex fictions—cultural artefacts); the impulse we are discussing is directed towards other

boys. Here, too, the artifices of society are signally destructive, for, if the boy had symbols which were *merely incomplete structures of abstracts from reality*, the native tendency to increase his knowledge would function satisfactorily. Instead, he has a wealth of contradictory and incoherent symbols plus his life experience (in so far as the latter exists in spite of distortions) and the latter factor gives him rapport with boys, just as the former interferes with the process of heterosexual adaptation soon to be demanded of him.

When the gonad function has matured to the state of semen production, and activation of the neural apparatus pertaining to its ejaculation, there comes the adolescent resymbolization. Here the youth has a field of experience of the very greatest pleasure-value coming with unprecedented suddenness, its dramatic appearance being made on the stage of a to him practically complete world-representation, leaving after its first appearance that representation a mass of crumbling systems which he must rebuild—secretly and helped only by the equally unfortunate—always under the eyes of that devil, “Sexual Sin,” formerly a mysterious, vague, wideflung influence, now a rapidly crystallizing symbol system including fictions of the past, present, and future, of hell fire, insanity, and everything else antibiological. The conflict between this gigantic mental fraud and the indomitable sex impulse, spreading to well nigh every symbol, provides the “language” of all ill-defined cravings, of every pleasure source ever inhibited, and forms thereby the justification of Freud’s use of the term “sexual,” in so far as in it he voices the Jewish and Christian repressions erected in the path of human biology to insure a man-designed, and perhaps none the less wonderfully useful, artificial culture. I leave you with this question: Cannot careful study of the facts of individual personality genesis, carried on by a strictly scientific method, give us a real (not fantastic) program for parent and child guidance which, while preserving our cultural achievements, will avoid this damnable adolescent situation, the fruits of which, now, are mediocrity or some degree of mental disorder in the case of most of our promising children?

THE SIGNIFICANCE OF A DELUSION

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A young man of twenty-two was referred to me with the statement that he suffered from an obsession. While playing football in college he had broken his nose, and as a result its shape was slightly altered. He then developed the morbid idea that this hardly noticeable deformity gave him a "sour expression" and caused him to look like a "sissy" or "mollycoddle." This, he said, made him extremely self-conscious, and added that he had observed that other people noticed his appearance and laughed at him because of it. These things gave him so much annoyance that he had appealed to his family for permission to leave college, and when they failed to grant it he ran away and went to work as a laborer. His morbid idea had come on almost immediately after the injury. So far as I could learn he had never shown any definite signs of mental illness prior to that time.

When I first saw the patient he seemed to have considerable insight into his illness, but a little longer acquaintance with him clearly showed that he was suffering from a delusion rather than an obsession, and that his malady was a beginning paranoid dementia precox. In consequence, he remained under my care only a short time, though long enough to furnish some interesting data as to the meaning of his morbid beliefs.

The patient was the only son in a rather prominent and well-to-do family. He had one sister several years older and one four years younger. His father had died some years earlier; his mother was living and had married a second time a few months before his illness broke out.

In school he had been a fair student, though without serious interest in study. An extreme readiness to take offense at real or fancied slights and an overweening conceit tended to make him unpopular with his fellows, and the teachers considered him rather malicious and unruly. He was a fine athlete, however, and the best football player in the school, and his achievements in this sphere well counteracted the tendency to unpopularity caused by his unpleasant disposition.

From what little I learned of his more intimate history, it appeared that he had always been extremely fond of his father, who seemed to have been an unusually fine type of man, but that his feeling toward his mother and sisters was usually hostile, irritable, and contemptuous. He had had intercourse with prostitutes and with other women of much the same level, but he had little to do with girls of his own class, and he had never been in love. His general attitude toward women was rather contemptuous, and it appeared that, save perhaps in his childhood, he had never had truly affectionate relations with any female.

A few words as to the theoretical expectations in the case of delusions of this type will not be amiss.

Delusions, like obsessions or hysterical symptoms, are considered to be the conscious manifestations of certain repressed and unconscious mental activities.¹ These mental activities—ideas or impulses—are of a sort unacceptable to the conscious personality of the individual. The repression would have rendered him totally unaware of them, if it had been completely successful. The illness corresponds to a partial failure of the protective repression, in consequence of which the unacceptable presentations gain some access to consciousness. But they are not admitted in their original form. For although the repression fails to hold them completely out of consciousness, it does succeed in distorting that part of them which it cannot exclude sufficiently to protect the individual from recognizing them for what they really are. The analysis, or interpretation, of a delusion consists, then, in translating it into terms of the unconscious, repressed ideas for which it has stood in consciousness as a distorted representative.

In a delusion like that of this patient the distortion produced by the repression is accomplished through three familiar psychic mechanisms, namely, Displacement, Projection, and Condensation.

By Displacement we understand a condition in which the affective content of a given presentation breaks through the repression and becomes conscious to the individual, while the ideational content remains more or less successfully repressed. In place of the repressed ideas other ideas closely associated with or similar to them enter consciousness and present themselves to the individual as if they were

¹ This patient's idea about his nose (if one disregards the delusion of reference) was so like an obsession that I have used the case in lectures on the compulsion neurosis to illustrate the psychic mechanisms by which obsessions are formed.

the ones which belonged with the emotions. Thus in the present case, the emotions which the patient felt about his broken nose would really be ones which had been disconnected from the ideas representing the true cause of these feelings, and had then been displaced upon this new idea as a substitute. In other words, the feelings which he thought were occasioned by his broken nose really originated from something else, while the notion of the broken nose was merely an idea associated with whatever it was that really gave rise to them.

By Projection we understand a process by which the perception of something endopsychic is received by the individual in the guise of a perception coming from the external world. It occurs when the imperfect defensive repression, unable to prevent the individual from becoming conscious of certain of his own unacceptable thoughts, does however succeed in preventing him from recognizing that they are his own. Thus they appear to him as impressions coming from outside his mind. Very often they have the form of perceptions of what other people are thinking. Thus the patient's idea, "Other people laugh at me," should presumably be translated, "I find myself ridiculous, or deserving of contempt, because of —." The notion, "I have a sour expression" (without the corresponding state of mind), may be construed, "I have a state of mind which would naturally show itself in a sour expression."

By Condensation we understand a mechanism whereby two or more unconscious themes or contents, not necessarily related to one another, find conscious representation through the same symbol or symptom. Thus the patient's delusion would presumably be "over-determined"; analysis of it would reveal that it had not merely one, but perhaps several meanings, which might not be closely connected with one another.

With this preliminary statement we may now proceed to some of the psychological data available in the case.

Soon after the patient came to me he had the following dream: "I was making ineffectual efforts to play some sort of brass horn or bugle, which was bent or broken. Some people, including my mother and probably other members of the family, were laughing at me. There was a baby present in the dream."

When the patient was asked for associations, a certain scene from his early childhood immediately came to his mind. This scene, he said, had always been retained in his memory and he believed that it probably was the earliest thing he could remember. It had to do with a time when his younger sister was still a very small baby. The

family were standing about, and all of them were laughing at him. They were saying something concerning him, but what this was he had never been able to recall. But he knew that it had to do with his having shown jealousy of the baby, his sister.

It is to be noticed that this memory, recalled as an association to the dream, has certain elements in common with the dream itself. In both the patient is laughed at by the family; in both there is the presence of a baby. But in the one case the occasion for laughter is furnished by the patient's jealousy; in the other, by his attempt to play the broken horn. But in view of the similarity in content, the suspicion arises that perhaps the dream was a somewhat distorted reproduction of the childhood experience.

But the idea of being laughed at, which was present in both the dream and the childhood memory, was also a detail in the delusion. Likewise, the idea of something broken is common to both the dream and the delusion, while the "sour expression" of the delusion was probably present as a fact in the childhood experience. No doubt the little boy wore a sour expression by reason of his jealousy. This community of superficial content between the three items suggests the possibility of an even more extensive identity of deeper content; that is to say, that the same unconscious theme was present in all three cases, though in a somewhat different guise each time.

Now if the dream and the delusion express the same theme, then the broken or bent horn in the one and the broken nose in the other would probably be symbols having the same meaning. But how could they mean the same? An answer is rather simple. In slang speech the nose is often spoken of as a "bugle." To blow one's nose is "to blow one's bugle." The broken or bent horn in the dream could thus very easily have the same meaning as the broken nose, whatever this meaning might be.

But according to an earlier hypothesis the broken or bent horn or bugle in the dream was probably an equivalent for the jealousy in the childhood incident. How, then, could the broken horn represent jealousy? Again an explanation is not far to seek. In the childhood scene the family were saying something which the patient had never been able to recall. What could this have been? The answer immediately presents itself once we ask, What do families usually say when a small boy shows jealousy of the baby? Almost invariably they use the phrase, "His nose is out of joint." So common is this expression in such circumstances that one can assume as almost a certainty that it was the one employed by the patient's family in the

scene of his childhood. But we have had reason to suppose that the horn or bugle in the dream was the equivalent of a nose. If, then, we regard the broken or bent horn in the dream as the conscious representative of the unconscious idea of a nose, and reflect that the nose thought of in the unconscious was probably one which, instead of being *broken*, was *out of joint*, we see at once that the dream really is a reproduction of the childhood experience. The broken horn or bugle in the dream is a substitute for the idea of a nose out of joint in the repressed thoughts; it is, in short, a symbol for jealousy. The detail as to what the family said, which was missing in the patient's recollection of the childhood incident, is present in the dream disguised as through a play upon words.²

This play upon words which is the key to the dream is now revealed as possibly the key to the interpretation of the delusion. In other words, the emotions which the patient connected with his nose having been *broken* probably arose from having been *put out of joint*. Thus, it would seem that he must have been the victim of some serious occasion for jealousy, and that the delusion developed when affects thus created had been displaced to connect with a false ideational content, the notion of a nose broken, related to the repressed content by a play on words.

What was, then, this occasion for jealousy thus assumed to exist?

² It may be of interest to record how the patient reacted to the analysis of his dream. I told him that I thought that what the family were saying of him in the childhood scene was that his nose was out of joint. He replied that this reconstruction seemed to him both amusing and plausible and was very likely correct, although he could not be sure. He said that he knew he had heard the phrase in question, and that he had a feeling that sometime or other it had been applied to him, though he could not remember definitely when, and was utterly unable to recall whether or not this was what the family said in the childhood scene.

A little later (though before I knew the circumstances in which his delusion developed) I said that I thought his morbid ideas about his nose had something to do with jealousy. He replied that this was utterly impossible. For, he declared, his ideas about his nose were not morbid, while, in the second place, he insisted that jealousy was an emotion entirely foreign to his character. The childhood scene, in which he had shown jealousy of his baby sister, was, he said, the only instance in his whole life of his having experienced this emotion.

This denial of jealousy really supports the theoretical expectations in the case rather than otherwise. That is to say, if jealousy had entered into the genesis of his delusion, we should suppose this to have been a repressed and unconscious jealousy rather than one of which he was fully aware.

What in the circumstances attending the onset of the delusion would have served to put the patient's nose out of joint? The story is a rather long one, but it gives a satisfactory answer to these questions.

As has been said, the patient was decidedly the best football player in the school which he attended before he went to college. Both in football and in athletics in general he had had no serious rival, and despite the tendency to unpopularity caused by his unpleasant disposition, he had received a great deal of adulation and hero-worship in consequence of his athletic success. In this he reveled, and, secure in his position, took no pains to avoid being arrogant and boastful. He wished to go to college in order to play football, not for the sake of an education, and he made no pretense that the case was otherwise. Also, he asserted with enviable self-confidence that not only would he win a place on the varsity football team, but that he would do so during his freshman year, which is really a great achievement.

In college he found himself at first in circumstances very different from those which he had left behind in school. No longer was he a conspicuous figure. Instead, he was an obscure freshman, a member of the lowest stratum in college life, and the victim of the full share of hazing usually accorded to the arrogant newcomer. Instead of being received as a finished athlete, and welcomed as a valuable addi-

Everyone is subject to jealousy, and those people who believe that they never experience it ordinarily turn out to be ones who are especially prone to it, but with whom it is repressed. (Compare Freud, "Certain Neurotic Mechanisms in Jealousy, Paranoia and Homosexuality," *Internat. Jour. of P. A.*, Vol. IV, p. 1, 1923.) Its extensive repression in these cases is perhaps a consequence of an especial readiness to the reaction; the child manifests jealousy very early and very intensely, and thus brings upon himself unusually vigorous measures on the part of the parents to correct and repress the tendency. In consequence of this early repression the person may go through life (as did this patient) continually a victim of intense jealousy yet never clearly aware of it. That this young man was of an extremely jealous disposition would have been apparent to anyone upon a short acquaintance with him.

The patient's inability to remember whether in the childhood scene the family were saying that his nose was out of joint speaks neither for nor against the correctness of my reconstruction. In analyzing a psychoneurosis, such reconstructions are often made, and for a long time the patient remains in doubt as to whether they are correct or not. This doubt is ordinarily ascribable to the resistance, and the patient's memory confirms a correct reconstruction only after that point in the analysis is reached when the resistances applying to the theme in question have been overcome. The work with this patient did not continue long enough for this to occur.

tion to the football squad, he had at first to work very hard to gain any recognition at all. Instead of being without serious rivals, he found formidable competitors standing between him and the coveted place on the team.

But despite all this, he gave promise of being able to adjust himself. He worked very hard at football practice and was at length recognized by the coaches as highly promising material. He continued to brag that he would gain a place on the team in his freshman year, and in time he advanced to a point where it appeared very possible that he would make good this boast. He was a candidate for halfback, in view of his weight, speed, and previous training in that position. The position of right halfback on the varsity team was already occupied by an upper classman who had played it with such skill during the two previous seasons that he was obviously a fixture on the team. But the man who had played left halfback the preceding year had graduated, so this position was open.³ The competition for it at length appeared to have narrowed itself down virtually to two men, the one an upper classman who had been a second string player the previous year, the other the patient. The odds were very decidedly in favor of the former, yet the patient still had some chance of success. He was certainly developing rapidly as a player, and it was possible that he might at length pass the other man. Moreover, he had reason to feel sure of being substitute halfback, and even this was a big achievement for a freshman. As a substitute he had a good chance of playing in some of the important games on account of the likelihood that a regular halfback would be injured. The other competitors for the position he had ceased to fear. Although to win the position of substitute halfback would have meant much, he in no way relaxed his efforts to establish himself as a regular.

But having reached the point where he felt certain of being a substitute, with the regular position by no means out of reach, the patient was overtaken by a series of misfortunes. First, one of the other candidates, apparently outdistanced by the patient and his chief rival, began to show unsuspected ability, and became, almost over-

³ Many of the minor details in this history are given from my memory and some of them may be inaccurate. I have notes on the case, but they cover only such matters as dreams and the more important details of fact. I think I can vouch for the accuracy of everything essential in the case, and my statement of unessential details (such as whether the patient played right halfback instead of left, and such matters) is probably correct in most instances, though doubtless there are some errors.

night, a dangerous competitor. Then suddenly, and without the slightest warning, the patient was removed from the varsity squad and ordered to take the position of halfback on the scrub team, which played against the varsity in practice. Possibly this was only a disciplinary measure designed to curb the young man's arrogant spirit, and the coach intended to put him back on the first team after a few days, but at any rate this demotion created in the patient a storm of rage and chagrin, and fired him with envy and hatred of his apparently more fortunate rival.

He managed to conceal his feelings, however, and played his position on the scrub team for a few days, hoping continually to be called by the coach to take again his former place among the ranks of the élite. But the call did not come. This was unbearable, and at length hatred and jealousy got the better of his judgment. His rival, the varsity halfback, was making an end run, and the patient had a chance to tackle him. From the unscrupulous coach of his preparatory school team the patient had learned a great deal of "dirty" football; tricks of tackling or interference designed to injure an opponent and put him out of the game; tricks forbidden by the rules but hard to detect. One of these the patient, seething with jealousy and malice, now employed, and brought down his rival with a "dirty" tackle which, had it been better executed, might well have inflicted considerable injury. The alert coach saw what took place and gave the patient a furious tongue lashing. The latter made no reply, but quietly waited until he had another chance to tackle his rival. This time he brought the runner down with a tackle which was perfectly legitimate but as violent as possible, and, as he got up from the ground, he turned to the coach with a sneering smile and asked, "Well, what do you think of your pet now?" "I think," replied the coach, "that we don't need your services just at present," and he called another player to take the patient's place as halfback on the scrub team.

The patient was now frantic. Reduced first to the scrub from the first team squad, he was now removed even from the humble position of a scrub player. The period of important games was approaching and the time therefore a critical one. Would he get back on the scrub and from there to the first team squad, or was his ambition to make the varsity his freshman year doomed to go down to humiliating defeat? The outlook was dark. Every day of practice counted at this season. Each one that went by without his being called for play made the outlook darker. Daily as the teams went

out for practice the patient appeared on the side lines; throughout the practice period he was hoping, always hoping to be called for play on one of the teams. Several days went by and no call came. Then suddenly, in the middle of a practice game, the coach called him and ordered him to play in the coveted position of left halfback on the first team. Here, perhaps, was his chance. If energy, daring, and determination might serve to restore him to the coach's favor he was resolved to be restored. He played brilliantly, and with a reckless fury such as he had never known before. At length an opposing runner broke through the varsity line and, eluding the tacklers, started for the goal with a clear field ahead of him. The patient, a swift runner, set out to overtake him. He gained on the other and the gap between them rapidly diminished. But the runner was now not far from the goal. So short was the distance still to be covered that it seemed impossible that the patient could reach him before the goal line was crossed. There was only one chance, and that a desperate one. The patient took it instantly; he saw in it the possibility of redeeming himself in one daring and brilliant play. Shooting through the air head first like a diver from the springboard, he made an almost incredibly long diving tackle, encircled with his arms at just the right moment the knees of the flying runner, and the two came down with a crash.

But this dashing play through which he sought to retrieve his damaged fortunes proved to be the very thing which worked their final ruin. For as he dove head first after the running man in front of him, the latter's flying heels struck him in the face and broke his nose. The injury was serious enough for the college physician to forbid his playing again for ten days. This enforced absence from practice at the most critical time in the season would, as he very well knew, render it almost impossible to gain even the position of substitute on the team, particularly in view of the rapid development of his new rival. He protested against the physician's orders, but to no avail. He had to give in.

He was then confronted with the following situation: If, as soon as he recovered from his injury, he resumed football practice and continued his efforts to make the team, he was almost certain of a failure that would be obvious to all. He was thus subjected to a temptation to magnify his injury and to use it as a pretext for ceasing to try for the team. He could then say: "I would have made the team had I not been injured. But for misfortune I could have proved that I was the best man." But despite his conceit, the patient had suf-

ferred from uneasy doubts as to whether he was the best man, and as he very well knew the chances would have been against his making the team even if he had not been injured, and he was aware that others thought so too. So in a certain sense the injury was an advantage; it gave him a chance to give up trying, when to have kept on probably would have meant inviting defeat and would have revealed him unequivocally as unable to make good his boasts. At any rate, after his injury he never went out for football practice again.⁴

Only a person who has attended an American college can realize what a profound and heartbreaking disappointment was his failure to make the team, after having been so close to success. A boy of a different make-up than this patient might easily have comforted himself with the reflection that to come so near victory in the freshman year was a great achievement all by itself and meant a practical certainty of making the team either the next or, at most, the following year. But this young man was unable to deal with the matter in that manner. The situation created seems to have been for him one past

⁴We have not as yet any method of making a psychoanalytic case report that is truly scientific. The nearest approach to it would be a verbatim record of everything that both patient and analyst said. But such reports are obviously out of the question; for one reason, they would be so lengthy as to be unreadable. Usually one has to proceed as I have done here, and give the narrative very much in the manner of a writer of fiction. Parts of the case report, therefore, are based on objective and confirmable facts; with these data is compounded narrative material derived partly from what the patient stated concerning his thoughts and feelings and partly from what the analyst had to infer as having existed in the patient's mind without being conscious. The story of the events which led up to the injury to the patient's nose is an example of this sort of report. I have related what I *believe* went on in the patient's mind, and I imagine that anyone who had heard his story of the events would feel that my report is a pretty accurate statement of what really took place. But my narrative contains details of inner experience which he did not *say* he went through. For example, he was perfectly aware of his hatred of his rivals for the position of halfback. But I could never get him to admit that jealousy was the source of this hatred, although one would think that this should have been perfectly obvious to him. He was conscious of feelings of spite and animosity toward the coach, but could never see that back of this was a desire for the coach's favor for its own sake and apart from the advancement that might result therefrom. Thus my narrative is a mixture made up of reports of real occurrences, of the patient's statements of what he thought and felt and of what I had to assume must have gone on unconsciously in his mind. I have made no effort to distinguish between these three types of material in telling his story.

enduring. This was probably his first serious defeat in athletics, which made it especially hard to bear. Failure was additionally humiliating and difficult to accept after all his arrogance and boasting. He was not one who could lose with a good grace in any circumstances, and, though the injury gave him a sort of excuse for failing, he really felt he had suffered an out-and-out defeat. To remain in college beaten, to endure the malicious satisfaction of some of his fellows who, because of his arrogance and conceit, would readily relish his discomfiture, to watch detested rivals play in important games in the place he had meant to be his own, to see the crowd rise to its feet and madly cheer someone else for plays which he might have made, to listen after the games while others drank in the hero-worship which he had hoped to win—all this was more than the patient could bear.

According to the text of the delusion, the patient ran away from college because his nose had been broken and the consequent deformity gave him a sour expression which excited contemptuous laughter. According to the facts as we now know them, he ran away because his nose had been put out of joint by a rival gaining the place he wanted, because he could not tolerate not being the preferred one, because his self-love was deeply injured, because he could not swallow defeat nor accept failure without feeling humiliated. Thus a knowledge of the circumstances in which the psychosis developed shows that the delusion was by no means absurd, that the patient's behavior and feelings were quite adequately motivated, and that his reaction really departed very little from what would have been a normal and rational one in the existing circumstances. The whole matter has been supplied with sense and meaning.

But while we now have explained the delusion, can we be satisfied that this explanation includes all that it meant? We have reason for supposing that such is not the case. We should expect the delusion to be overdetermined, to have two or more meanings instead of merely one. What, then, might these additional meanings be?

The answer to this question has to rest upon material containing more of the theoretical than that which supported the first explanation. Nevertheless, it may be considered fairly well grounded.

To begin with, the interpretation of the dream seems incomplete. Clearly, the dream is a reproduction of the childhood scene. But why should this scene have been reproduced at all? And what is the wish that the dream fulfills? A complete interpretation would have answered these questions.

What else, then, does the dream mean? It is quite obvious that the horn in the dream might well have been a symbol for the penis as well as for the nose. Thus the broken or bent horn might have represented an injured penis, impotence, or the like, and the dreamer's efforts to play it could have been an allusion to masturbation.⁵ Furthermore, the nose is a frequent symbol for the penis, and it is very likely, therefore, that in the delusion the nose represented the penis as well as jealousy, and the idea of fracture or deformity corresponded to some thought of injury or deficiency of the penis. Moreover, the patient's delusional idea that deformity of his nose had made him look like a "sissy" or "mollycoddle" contains the suggestion of some notion of deficient masculinity; in other words, of effeminacy.

These items of material suggest an hypothesis which allows them to be viewed as different expressions of a single fundamental trend. This is, that the patient had an unconscious feminine or homosexual tendency which, at the time of the onset of his illness, had begun to break through the repression. The various suggestions of defect or deformity of the penis (or nose) could be explained as derivatives of the castration complex connected with this trend, and of the unconscious fantasy of being a woman. The delusional idea that he looked like a "sissy" or "mollycoddle" could then be interpreted as a projection of the endopsychic perception of feminine (homosexual) tendencies which were not directly conscious.

There is other evidence for supposing that an unconscious homosexual trend existed with this patient. He was remarkably fond of his father, but showed toward his mother that irritable, hostile, and contemptuous attitude which is strongly suggestive of the reversed Oedipus complex. His lack of any love affairs and his rather contemptuous attitude toward women generally tends to confirm this. Then it may be remembered that apparently his first rival was his baby sister, in other words, a female, and his jealousy or envy of her might well have given rise to the wish to be as she was, or have served to reinforce a fantasy of femininity perhaps already created.

Another clinical item is so well explained on the basis of unconscious homosexuality that it may be taken as evidence corroborating the hypothesis that this complex was a factor in the case. Before I saw the patient he had gone to a plastic surgeon and had an operation

⁵ At the time of the dream the patient was recovering from an attack of gonorrhea. This infection, which had brought down upon him a good deal of censure from the family, was probably one of the inciting factors of the dream.

which was supposed to restore his nose to its original shape. He was not satisfied with the results of the operation, and still felt that his expression was sour and that he had the appearance of a sissy. When I first saw him he was clamoring for a second operation, which he believed would remove all his troubles.⁶ One is immediately tempted to interpret this nasal operation as a manifestation of unconscious homosexuality. That is to say, it appears to have been the living out of a castration fantasy. The organ he unconsciously wished to have operated upon was the penis, in order that he might be made into a female.⁷ The nose had represented the penis by virtue of the familiar "displacement from below to above." It would be quite characteristic that this operation, which should be considered a "measure of secondary defense" against unconscious homosexuality (inasmuch as it purported to be an effort to repair or perfect the organ which symbolized the penis), derived its chief motivation from the very tendency against which the defense was directed.⁸

The foregoing material seemed to me sufficient evidence for supposing that unconscious homosexuality was an important factor in the case. Yet it could hardly be considered that the existence of such a tendency had been proved beyond all doubt. So far as I could learn, the patient had never had any conscious homosexual feelings nor any homosexual experiences, not even those of boyhood which are so common. But this affected the matter neither one way or the other. Not conscious, but unconscious and repressed homosexuality would enter into the formation of such delusions, and a

⁶ It should perhaps be said that whatever alteration had taken place in the shape of the patient's nose was extremely slight and in no wise disfiguring. I have seen photographs of him which were taken before the injury and I was unable to make out that his appearance had been changed at all. His belief that he had a nasal deformity was almost purely delusional.

⁷ The sense of sexual guilt and the desire for self-punishment for masturbation would represent an additional determinant of the desire for castration. The family reproaches at the time of his attack of gonorrhea stimulated these factors and probably enhanced his desire for a second operation and gave rise to the dream. The dream may be considered as a fantasy which represents the patient as a female (the male genital deficient), and the childhood scene which it reproduces probably represented the first occasion (envy of the sister) for his wishing to be of the opposite sex.

⁸ Cf., Freud, "Bemerkungen ueber einem Fall Zwangsneurose," *Sammlung kleiner Schriften zur Neurosenlehre*, III Folge, p. 151-3; or Frink, "Morbid Fears and Compulsions," Chapter IV, where similar instances of secondary defense are discussed.

postive history of homosexual feelings or experiences would probably be the exception rather than the rule in such cases. But at length confirmatory evidence for the hypothesis of homosexuality was furnished in a quite unexpected way. Some two years after the patient had ceased to be under my care he suddenly appeared in my office to ask some advice of me. I had neither seen nor heard from him during the interval. But I now learned the following facts: A few months earlier he had volunteered for military service, and had been sent to a training camp. Shortly before going to the camp he had spent a night at a hotel in a nearby city. After reaching the camp he developed the delusion that an elevator man in this hotel had started a report that he (the patient) was an invert and had made homosexual advances to him. This report, the patient believed, had reached the camp, and was being circulated there. He thought that people avoided him, looked at him queerly, and made remarks about him because of it. At length he had begun to suspect a certain captain as the person who was chiefly instrumental in spreading this tale, and when one day he overheard the captain say to one of the men something which he believed referred to him, his suspicions were so strongly confirmed that he attacked the officer on the spot. He was placed in the guard house, but evidently it was discovered that he was insane, for he was soon released and discharged from the service without dishonor.

This new development in the case may be considered sufficient to settle the question of unconscious homosexuality beyond any reasonable doubt. The patient's illness was now a fully developed dementia precox and the suspected unconscious homosexuality had come frankly to the surface in the form of a delusion. In other words, the repression had ceased to protect him successfully against consciousness of his homosexual trend and the best it could now do was to bring about a projection of the endopsychic perceptions so that instead of being forced to say to himself, "I believe I am homosexual," the patient was offered the somewhat less offensive idea, "Other people believe I am."

Once we are sure of the existence of a reversed Oedipus complex and a strong homosexual, or feminine, trend as factors in the case, new light is thrown upon the psychogenesis of the original delusion. That combination of god and slave driver, the coach, must have been for this patient, as is not uncommonly the case with college athletes, a substitute for the father; in other words, an object of libidinous interest, a person to whom the unconscious part of the patient's attach-

ment for his own father had been transferred. Consequently, to make a place on the team had signified to the young man not merely a source of self-satisfaction but a satisfaction of object-love. In other words, it would have meant acceptance as the preferred child of this new father. Failure to make the team or to win the coach's approval was, for the same reasons, the equivalent of a love-disappointment. The other candidates for the place of halfback had the significance of other children striving for the father's preference.

When, then, the patient had his nose put out of joint by a rival "child" and suffered a virtual love disappointment at the hands of the coach, his homosexual yearnings assumed a more specifically feminine form. Football must have served as a sublimation for his unconscious homosexuality, but his difficulties with the coach and his failure to secure a place on the varsity team at length broke the sublimation and rendered worthless this avenue of outlet, whereupon there occurred a damming up of the libido. This dammed up libido then regressed to earlier and more specifically sexual dispositions and at the same time partially overcame the previously successful repression. As regards the regression, it was just as if the patient had thought: "Inasmuch as I have failed to become the favorite child of the coach, I wish that I were a female and, as a woman, could win his love." The delusion, "Through my nose having been broken, I have the appearance of a sissy," is thus revealed as a slightly distorted equivalent of the perception, "Through my nose having been put out of joint, I have become like a woman."⁹

It is possible that the patient was oversensitized for disappointment in connection with the coach by an earlier disappointment. As has been said, his mother had remarried some months earlier. It seems not unlikely that the patient had unconsciously expected that her new husband might become a second father to him. If such were the case, he was sadly disappointed. For his stepfather promptly developed a very low opinion of the young man and took no pains to conceal it. His sisters, though they had not welcomed the new husband of their mother with any enthusiasm, and had been disposed to regard him as very crude and uncultured, nevertheless achieved a passable adjustment to him. But not so the patient; he and his stepfather became progressively more and more antagonistic, and

⁹The running away from college was not merely an escape from the scene of a defeat, but a flight from homosexuality. It was an effort to restore the failing repression by withdrawing from the object and the situation which gave rise to homosexual stimulation.

the former, in his resentment, did things which set him at odds with the entire family. The home situation therefore was very far from being a happy one for him at the time he left for college. Had he made a better adjustment to his stepfather and been spared the maladjustment to the rest of the family which occurred in consequence of his difficulties with the stepfather, it is probable that he would not have been subject to so much damming up of emotion, that his transference to the coach would have been less intense, and that disappointment in that connection would not have resulted in so profound a reaction.

We may sum up the psychic causes of the outbreak of the patient's disease by saying that *it occurred when as an adult he was placed in a situation where again as in his childhood his nose was put out of joint by a rival for the father's love.*

* * * * *

I am not inclined to regard dementia precox as a chiefly psychogenic disease. In this and in numerous other cases it seems pretty obvious that a situation of psychic conflict provoked the outbreak of the disease and determined the form of the delusions. But the disease was probably latent there anyway and would have manifested itself eventually without the coöperation of these factors. The psychic "causes" of dementia precox probably serve merely to make manifest the slowly developing malady and to determine the content of the delusions.

In the course of the work with the patient he was given some analytic explanation of his symptoms and of the psychic factors which they seemed to express. Not the slightest observable benefit resulted. If the explanations had any effect at all—and I am inclined to think they had none—it was that of making the patient cling to his delusions even more stubbornly than before. This is in accord with my experience with several other cases of beginning dementia precox. In none of them was I able to convince myself that the analytic work had the slightest beneficial result.

In spite of the rather inviting opportunity to do so, I have not attempted to utilize this case as an illustration of some of the theories developed more recently as to the psychology of the so-called narcissistic neuroses, but have preferred to make this paper essentially a clinical rather than a theoretical study.

THE FACTOR OF PARENTAL ATTACHMENT IN HOMOSEXUALITY

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The genesis of homosexuality is attributed by many members of the psychoanalytic school to an early and intense fixation, in the case of boys, upon the mother, in the sense of the Oedipus complex, and in girls, upon the father. The theory is evidently based upon the fact that the histories of homosexual adults frequently indicate that there was manifested in the childhood of the individual a strong erotic attachment to one parent.

Freud¹ has maintained that at the same time that the young boy identifies himself with his father, taking the father as his ideal, he has begun to develop an "object-cathexis" toward his mother, according to the "anaclitic" type, *i.e.*, "he chooses as his first sexual object the same person who has satisfied his early nonsexual needs." The identification with the father and the object cathexis toward the mother exist side by side without interference for a time, and then, because of "the irresistible advance towards a unification of mental life, they come together at last, and the normal Oedipus complex originates from their confluence." The identification with the father then is substituted by the wish to replace the father in regard to the mother.

At puberty, it is maintained, there is normally a transfer of the affections from the mother to other female individuals, since the erotic love of the mother can no longer continue to develop consciously. But, according to Freud,² the homosexual does not abandon the mother, but represses his love for her by identifying himself with her. He then "looks about for objects (of his own sex) which can replace his ego for him, and on which he can bestow such love and care as he has experienced from his mother." In his study of Leonardo da Vinci,³ Freud points out that the boy is guided in

¹ Freud, Sigmund. *Group Psychology and the Analysis of the Ego*. The International Psycho-Analytical Press, London, 1922, pp. 60-61.

² *Ibid*, p. 66.

³ Freud, Sigmund. *Leonardo da Vinci*. Translated, Brill, A. A. New York, Moffat, Yard and Company, 1916, pp. 65-66.

his choice of a love object "by taking his own person as a model." Thus the boys whom he loves are "substitutive persons or revivals of his own childish person whom he loves in the same way as his mother loved him." He remains fixed in his unconscious, however, upon the memory of his mother. By repressing his love for her, he retains it, and so remains faithful to her. "When as a lover he seems to pursue boys, he really thus runs away from women who could cause him to become faithless to his mother."

Freud⁴ indicates the significance of the attitude of the mother in fostering her child's love for her. He points out that frequently she bestows too much love upon him, thus causing his eroticism to mature too early. This situation is furthered, he says, by the absence of the father during the childhood period, whereupon the mother bestows her affection upon the boy in place of the husband.

A similar attachment of the girl for the father is held to account for the development of homosexuality in girls. Jung⁵ points out that "it frequently happens that among young girls at the time of their first love, remarkable difficulties develop in the capacity for erotic expression, which may be reduced analytically to disturbances through a regressive attempt at resuscitation of the father image." Kempf⁶ states that "when girls admire their fathers they are very prone to feel strong attractions for men having some of their father's attributes and may be unable to feel love reactions for other types of men. This tendency varies considerably in degree with different girls and, as their affections become more definitely conditioned so as to react to their father's attributes only, they become more unable to love all other types of men. If the type of the sexual object that alone has the property of invigorating the male's or female's sexual functions is so highly specialized by a parental attachment that no adequate image or substitute can be had, the individual tends to suffer from the horrors of incest. Passive homosexuality is usually the result of so conditioning the affective reactions that the individual is incapable (castrated) of heterosexual powers, fear apparently causing an affective regression to a more dependent affective attitude."

Bleuler questions whether or not an erotic attachment to a

⁴ Ibid, p. 92.

⁵ Jung, Carl G. *Psychology of the Unconscious*. New York, Moffat, Yard and Company, 1916, p. 55.

⁶ Kempf, E. J. *Autonomic Functions and the Personality*. *Nervous and Mental Disease Monographs*, 1918, No. 28, pp. 63-64.

parent in childhood is invariably indicated in the life history of homosexuals, but he agrees that it is a common finding. There is no doubt that accurate histories of the early life of adults are difficult to obtain. First of all, the adult has forgotten many of his early experiences, and secondly, he may unknowingly repress many details or incidents that he regards as insignificant or unrelated to his problem. Furthermore, in many cases, it is impossible to obtain a history from the parents or other persons who have lived in close contact with the individual as a child, so that the accuracy and completeness of the available information are dependent entirely upon the statements of the subject. For these reasons, details regarding the erotic attachment of a child for the parent may be completely overlooked. It is exceedingly important, therefore, to study cases of homosexuality in children, where the factors detrimental to a complete study of the adult are absent.

During the past year a number of cases of homosexuality in children have come to our attention. In all of these cases it was possible to obtain a complete history from the parents, and in the majority of cases, full coöperation from the subject. The facts in these cases tend to confirm the idea that homosexuality develops out of an early undue affection for one parent. Two of the cases, representative of the group, will be presented here.

L. F., colored, age eleven years, six months, was referred for examination by the school teacher because he seemed unable to do the required school work and was suspected of masturbation. He was also a disturber in the school room, and annoyed girls at play time, putting his arms around them and seizing their breasts. The teacher also described him as day dreaming a great deal during school hours.

The boy was an only child. His father was employed as a Pullman porter, and was away from home most of the time. The mother was also employed outside of the home, returning from work late at night. The boy was thus entirely unsupervised after school hours, and no accurate account of his time during these hours was available. According to the boy, he had few friends, and spent his leisure time playing with one or two older boys in the neighborhood.

The physical examination revealed no abnormality except an unusual development of the breasts. According to the Stanford-Binet intelligence test, the mental development was twelve years, eleven months, intelligence quotient 112, classification "superior intelligence." There was unusual scatter in the tests, in that the basal year was eight, and successes were made in the eighteenth-year level. School ability, as measured by achieve-

ment tests, was excellent. The school difficulties, then, were obviously not due to any intellectual defect.

The boy cooperated well except when questioned regarding his behavior with girls. On this point, he at first refused to talk, except to answer in monosyllables, but later he stated that his only misbehavior with girls was to tease them, and he attributed his school difficulties to this behavior. He described periods of "thinking" during which he was evidently somewhat confused, and imagined "many things," mainly concerning his mother.

The following history was given by the mother. The boy was somewhat untidy in his habits. He had never stolen anything, and was usually truthful, although he would lie to protect himself from punishment. Five months previously, he had visited an adult negro who lived in the neighborhood. The mother learned that this man had practiced fellatio upon the boy. She forbade his returning there, but discovered that he visited the man frequently during her absence at work, always returning about an hour before she did. She had the man arrested, and ordered the boy to stay in the house after school, allowing him no chums except those at school.

When questioned concerning his visits to the negro, the boy stated that he had returned voluntarily each time. He said that he was frightened and had cried when first attacked, but that the experience was not unpleasant. Through further questioning of the mother, an intelligent mulatto, it was learned that she had given the child no sex instruction, although he frequently questioned her about sex topics. When he was eight years of age, he had asked her where babies come from, and she told him she would explain it when he was nine. The following year he came to her with the same question; she was embarrassed and told him to ask the boys in school. The patient slept with his mother, and had been doing so for a number of years, as the father was away much of the time. When asked whether the boy was unusually affectionate toward her, she related that when he was about six years of age, she noticed one night when she and the patient were in bed, that the child had an erection. She told him to go to the toilet, but he insisted that it was not necessary. She then asked him what made him like that, and he replied, "I am always that way when I think of you, mother." She reprimanded him, and discouraged further sex interests.

Some explanation of his difficulties was given to the boy, and he was asked to return with any question that occurred to him. The following week he appeared with the written question, "Where do babies come from, and why do people get married?" Sex information was given him, and plans made to send him to the country for a vacation. The teacher reported that his conduct in school improved almost immediately, and that his school work was excellent.

It is not maintained that this boy will become a homosexual, but merely that he did have an erotic love for the mother, indulged in day dreams of her accompanied by masturbation, and that he did seek sex contacts with a male. It is, of course, possible that with maturity his affections will be properly transferred to the opposite sex.

Irene K., age sixteen years, came for examination because of "nervousness"; things would fall from her hands while eating, and then she would begin to cry. For the past seven months she had been living away from home, with a married sister, because of her stepmother. It was not that they could not get along together, but that she did not feel "at home" there. There was always something on her mind, about things said to her. She stated that at one time she had felt resentment against her father for marrying the type of woman he did, but that she no longer felt that way about it. At this point in her narrative she wept bitterly, and then said that she felt ashamed of her weeping. Her mother died when the patient was thirteen years of age, and the father remarried four months later. He maintained that he did this for the children's sake, but the patient felt that this was not true. She stated that she had had no "nervous spells" before her father's remarriage, although she had been stubborn and had had "her little fits" of temper. About a year after the father's remarriage she began to be nervous, and no longer felt "at home." She maintained that her own mother had "cared too much" for her father, that he was a very handsome man with whom many women were in love. Her mother was older than her father, and he intimated to the patient that he had really been "seduced" by his wife. According to the girl, her father believes his second wife to be "angelic" and wouldn't say anything against her.

The girl maintained that as a child her father didn't understand her, she hated him, but later changed toward him. As a matter of fact, according to the history, she was very affectionate toward him when a young child, and was known as the "kissing bug" of the family, because she was always hugging and kissing her father.

The earliest incident connected with the father that the patient could remember was that when she was about eleven years of age he had put his hand on her breast when she was sitting on his lap, and had remarked that she was developing rapidly. She was deeply offended at this, and never wanted him to touch her again. She then related that she had noticed a lot of things before that; the family had lived in a congested neighborhood and their living quarters were small; sometimes the mother and father would go to their room and lie down together, and the patient "had a feeling inside" and hated them. She never felt jealous of her mother, but did of her older sister, believing that her father cared more for the sister than for her.

The patient stated that she had no boy friends, admitting that she did not care much for boys, imagining that they like to "mush." At different times, she had been very fond of a number of women. Once she was "crazy" about a beautiful settlement worker; then she was in love with one of her teachers. She liked to feel that she was close to her, and craved her love. Usually she felt "more at home" with men than women, adding, "The less I care for a person, the more at home I feel with them."

In this case, the girl's erotic attachment for her father could not continue to develop consciously, and was repressed; consciously, she felt that she hated him, although at the same time she was jealous of her sister, and experienced shame when her father caressed her. She did not feel "at home" in her father's house, after the advent of the stepmother, and left there; and she stated that she felt most "at home" with those she cared least about. She criticized her father for remarrying, and resented the fact that he regarded his second wife as "angelic," although admitting that she had nothing against the stepmother and did not dislike her. Although associating with boys daily in school work, she had no boy friends, and feared their advances, whereas she had already been unusually fond of a number of women. There is, in this case, a strong probability that, unless the original conflicts are removed, no normal transference of the affections will take place.

Homosexual individuals have frequently been classified into two types, the innate and the acquired. The innate homosexual is said to have inherited a neuropathic makeup, with some special defect leading him into homosexuality. Various physical or glandular defects, and often defects of the genitalia, have been assigned as the primary cause. In our cases, no glandular defect was present, and no physical defect of the sex organs. Studies of homosexuals thus far made have not indicated that physical defects are an invariable or even a frequent accompaniment of the unusual behavior. Further, observers at the present time are very skeptical of the inheritance of "tendencies" to particular types of human behavior. The diagnosis of "innate homosexual" is no doubt often made because of a failure to find the psychogenic factors of significance in producing the behavior. When a study of homosexuality in children is made, where an accurate history of the factors conducive to the final behavior is obtainable, details regarding the psychogenic origin of the behavior are likely to be found. In our series of cases, an erotic attachment of the child for one parent was an outstanding feature.

THE SYNTHESIS OF DREAMS:
A STUDY OF A SERIES OF ONE HUNDRED DREAMS

By HAVELOCK ELLIS

(Continued from Vol. XII, page 459)

DREAM CIX. *This dream took place four years later and is of rather different type, seeming to indicate a more mature stage of development.*

I cannot remember exactly how the dream began, but I see myself in bed with my favorite brother (lost in the war); we were both naked and lying spoon-fashion, I with my back to him. (It was the position in which I had actually gone to sleep.) It is my brother, but at the same time it is Death. He is dear to me. We are loving each other tenderly but yet he is Death as well as Love, those two divine things, which he is forever in my thoughts since Death took him from me. This mystic lover—Death, Brother, and Love—is loving me and caressing me, and I feel very happy with his flesh against mine. He caresses me with his hands, covering all my naked body, especially the thighs and legs, with large slow movements full of tenderness. I feel all through how much he is a lover, but also how much he is Death, and how sweet and tender. Though my back is turned to him, I seem to see him, lean and bony, like a skeleton, hardly covered by flesh, and yet that flesh is so sweet to me, and the head, which I also seem to see, is small (as those of skeletons seem to be compared with those of the living), bald, beardless, but not terrifying; without definitely recalling my brother's features, I know that it is his face, rosy, with a tender rosiness like a child's face and quite unlike a death's head. Yet it is indeed Death that is loving me, and at the same time it is indeed my brother. After these delicious caresses, he sits up and throwing back the bedclothes and finding me lying flat on my back he raises the nightgown which I then seem to be wearing (before we had both been naked) and uncovers my legs, stomach, and body, which is then seen to be, on the left side, from beneath the breast to low down on the belly, adorned by a very beautiful picture in colors, a landscape. My brother says tenderly, and with gentle pride: "That is the expression of our love, which you have produced," and I am lost in wonder. I wanted him to go on caressing and loving me, so that other beautiful things should come out and cover my legs and thighs with fine landscapes, to express in color all that I am feeling; but my brother says gravely: "No, that is not for the present. To find in colors the expression that you are seeking you need solitude." Here the dream became vague. The name of B. seems to float before me and the words "expression in

colors." (Here it should be explained that B. is the author of a book, read just before I went to bed, in which I had much admired the power to express color. It may also be added that my brother was a painter.) After my brother's remark I felt at first a little sad that he wished to leave me alone—it is so good to be loved—and then I felt that he was right. Still I need company and I decide to leave my brother's bed and go and sleep in my sister's. She is lying, not yet asleep, in a small bed which I ask her permission to enter. She consents, even seems pleased, but soon falls asleep, and we are in an uncomfortable position, back to back, her rather large buttocks against mine. In sleep her body arches, and her posterior is thus propelled as a sort of battering ram, pushing me to the edge of the bed, so that I fear I shall fall out and begin to think that it is not pleasant to sleep with a sister who is so inhospitable and whose bottom is so fleshy and so firm. Then I awake for a few seconds and on going to sleep again find myself with my brother—here again also my lover and Death—both of us naked. Again he is loving me with large tender caresses and again, as before, he throws back the bedclothes and lifts my nightgown very high, then kisses me between the legs, a long, voluptuous, tender, delicious kiss, so that I nearly lose all sense of the real world, save of my brother's gentle hand covering and caressing my left breast. He stops in the midst of the long kiss to ask: "Would you like me to kiss your breasts?" But I, in a trance, reply, "No, go on," and the great delight of that kiss again absorbs me entirely. But he stops, and seeing me lying flat on my back gazes at my legs and body; on the left from below the breast to the bottom of the belly there was a great brown patch. My Brother-Lover-Death exclaimed: "There is no more picture, but that is where it was; it has left traces. Everything in you, with the help of our love, is preparing for it."

After that I seem to remember no more. I awoke much moved by this dream which seems to contain the mystic and erotic essence of my intimate life and affections.

Before passing on from the erotic dreams of this subject, which have now been revealed, with singular frankness, in all their aspects and all their intimate personal recesses, from the crudest to the most spiritual, it may be of interest to consider briefly the personality of the lover in these dreams. We are not here called upon to do this analytically, and it may even be said that this would be in any case unnecessary, because, without going beneath the surface, these dreams reveal manifestly and quite accurately the emotional phase the dreamer was in real life passing through. It used to be said, and is indeed still often repeated, that in dreams there is a "censorship" which suppresses or distorts wish fulfilments. That may be prominently true in the case of many abnormal or neurotic dreamers,

but such censorship is not pronounced in the case of normal, healthy dreamers, and indeed the significant fact for us to remember is that, as Freud has truly said, the heavy pressure of the "censorship" is really suspended, or at all events very much weakened, during sleep. Therefore it is enough to summarize the results synthetically. It will be found that the largest number, as many as eight, of these erotic dreams were enacted with completely unknown men, of lower social class, usually vigorous working men, ultra-virile, inclined to be rough and aggressive, occasionally dark-skinned foreigners; in this group the physical excitement was most apt to be pronounced, and most easily detected on awakening. Of the other dreams, one concerned the man to whom she had been engaged many years earlier; three her husband whom she had not seen for a year or two before this series of dreams began; six a new friend for whom at this time her affection was growing; one a more distant friend; one a man of her own class only known by sight and for whom she felt no attraction; one a half allegorical figure associated with her brother; one was of masturbation; one of swinging; two were mixoscopic, the sexual excitement arising from the scene witnessed.

The erotic picture thus presented seems fully adequate to all the excitations likely to be presented in daily normal life. Yet the largest group of all, the first, cannot be thus obviously explained, and corresponds to no pronounced emotions in the dreamer's waking life. It thus becomes of some psychological interest.

There is little doubt that what is misleadingly called "marriage by capture" has been common in primitive society. There has not usually been any violence or rape involved; the woman has retained her right to decide; but the man has exerted a show of force, and so is enabled to manifest his robust virility while she is enabled to manifest her feminine modesty. The courtship in this group of erotic dreams is clearly of the nature of "marriage by capture." The dreamer is impelled to invent a powerful and primitive lover whose sudden and ardent advances alarm and repel and disgust her; but gradually she is won over, the lover seems more and more attractive, and the scene tends to end in intense physical and emotional satisfaction. It would seem that we may properly regard dreams of this group—which are without correspondence in the dreamer's waking experiences or desires—as atavistic; but only in a very restricted sense. That is to say that they are the correlated psychic aspect of the most fundamental primitive sexual desire.

When in the sleeping woman the physical sexual impulse is making itself felt apart from her daily civilized life and her personal affections the ancient deep-seated associations of that impulse will assert themselves and the dreamer imagine that she is playing her part in a "marriage by capture." Most women, asleep or awake, are aware of the presence within them of this primitive desire to be carried away by force, even though in actual experience they would resent it and never yield to it. In dreams they can give it free play. I would propose to term the dream of this type *the Marriage-by-Capture Dream*.

Flying Dreams

I introduce the discussion of these dreams immediately after the erotic group, because there is some reason to think that in part—though, I believe, only in part—they lie on the borderland of the erotic group. When I wrote at length on such dreams in my book, *The World of Dreams*, many years ago, I did not find that they were ever erotic. I associated them with exaggerated rhythmic muscular movements, especially with the rise and fall of the chest wall in more or less excited respiration. The evidence seemed to make that clear, and I had no evidence in favor of a sexual origin. Then came Freud who asserted that dreams of flying are the expression of a sexual wish, a kind of symbolization, of sexual origin yet without organic stimulus. It might, of course, be possible to attach too much importance to this assertion. Freud at that time believed that "the majority of dreams are the expression of erotic wishes." So it seemed to me that he had no choice—evidence or no evidence—but to make the same assertion of flying dreams. But I was quite willing to take the suggestion seriously, and I gave fresh attention to the matter. Freud had brought forward no convincing evidence on the point, but I found that—while the respiratory origin of some dreams of the group could not be questioned—there was ground for believing that an erotic element must not be excluded. I found that in some of these dreams a distinct erotic coloring could be traced, and also that such dreams tend to disappear in late life when definitely erotic dreams also tend to disappear, though this later consideration is not decisive since in later life all dreams tend to become less vivid and less definite. It will be seen that there are two dreams of flying in the present series (LII and XCIV). On account of the interest of the subject I asked Madame N. to make further records of such dreams during the three or four subsequent years, carefully noting the circumstances under

which they occurred. This she was kind enough to do, and I am thus able to bring forward seven additional and highly instructive dreams of this class.

DREAM CX. *It was a very agreeable dream. I was flying on a huge aeroplane with many planes, and I was able to move about on the wings of the monster, like a fly on the wall, without even endangering its equilibrium.*

I am suffering from a sore throat.

The dreamer subsequently added that during the five following days, still suffering from her throat, she had two other similar flying dreams.

DREAM CXI. *Menstrual period.*

I had a rather pleasant dream of flying last night. I was floating in the air and being admired by a little crowd, amongst which was one of the masters of the school. "It is quite easy," I explained, coming to the ground. I proceeded to demonstrate this: "Take a long breath, lifting the chest; then, always holding your breath, bend down on your knees and take a sudden bounce, springing like a piece of elastic." I went on to do so. It was most delightful, but, alas, I awoke.

This dream is of peculiar significance because we find that, even in the dream itself, the dreamer realized the respiratory foundation of it.

DREAM CXII. *Last night I dreamed I was in a kind of office with a man, dressed in brown, rather fat, and a stranger to me, who was my boss. He told me that some document was missing but that we should find it in Irene's room (Irene is pure fancy), where he had gone to wash his hands. So we went up together to find the document, but, once in Irene's room, the man changed and became my friend F. and suddenly lifted me high in his arms, bringing me down again to sit on his hips, with my legs clasping him tight and the sensation of his coat and buttons against my bare flesh, for the flying motion of lifting me had raised my skirts like a balloon. The same movement brought my face above his, so that I looked down on it. Then I put my tongue forth just to touch his lips, but suddenly it became hard and swollen and I pushed it far into his mouth. It was so sudden that he was quite thrilled and his happy face amused me and I laughed cheerfully; I was feeling happy and highly mischievous. At the same time I felt strangely excited sexually, though this seemed only due to the contact of my bare flesh with the rough coat and a button close against the vulva. But then the dream became confused and fantastic, and the feeling of pleasure disappeared.*

DREAM CXIII. *I do not remember the beginning, but I see myself floating in the air. Unlike those flying dreams in which I simply let*

myself be borne up by the air passively in a vertical position and in a state of delicious ecstasy, I am full of energy and, as it were, swimming in the air. I make a movement of the legs, though only one leg seems to move, rather similar to that in swimming (in former years I often used to swim) and my body is extended horizontally on the side, while moving forward. In these movements of the legs it seems to me that people below can see beneath my skirts to the sexual parts, and that annoys me. I attempt while swimming to drape my skirts chastely around my legs. But all my efforts are vain. I suddenly find myself in a vertical position, with a man gazing at me from below. He makes a sign to me to descend, and I plane down to earth. I am no sooner there than this gentleman caresses me with his hands between the legs. I can feel his finger and I think (though I am not quite certain) that at the same time he was slightly smacking my posterior. I felt much thrilled and excited, to such a degree that in my dream I felt a strong desire to masturbate and dreamed that I was doing so, with such a sense of reality that on awaking I felt sure that I had really done it.

I have a bad cold and am unable to breathe through the nose, so was sleeping with my mouth open.

DREAM CXIV. I have had a flying dream which was clearly erotic and apparently with normal respiration.

The beginning was very vague, bringing in a friend of my youth with her beautiful complexion, and a man, a perfect stranger, small and with beautiful hair. When the dream began to interest me was when, leaving my friend, I started to leap about in mid-air in the most delightful way, laughing at the stranger below and teasing him, as I thought he would not be able to imitate or catch me. My position was not that usual in flying dreams, though there was no idea of swimming. I do not indeed recall the position in the first movements of rapid leaping and flitting about. Soon, however, I see myself with legs bent at the knees, as if I were kneeling in mid-air but with the knees much apart. The motion of the air lifted a thin chemise above the hips, and thus exposed the sexual parts to the little stranger below me. Then, very slowly and with great pleasure, I seemed to descend on his lips and receive a most delicious kiss in mid-air.

DREAM CXV. I had gone to bed much worried with the troubles of the day and full of fierce revolt against society in general. I tried to soothe myself by thinking of the calmness of F.

I do not know at what hour of the night I seemed to find myself, suddenly, quite naked, in a beautiful landscape bathed in dazzling sunlight. I was walking on alone full of joy to be thus bathed in light; my skin grew firm, my breasts stood out hard and round, with two little points.

Only there remained on my body the wrinkles of childbirth which my hands instinctively tried to hide, while my heart said gently to me: "They are the wounds of the war to which women go; he cannot but love them." I knew that he must love all the little defects of my body, and I lived in joy to think that at all events my skin was growing firm for him and my breasts regaining their beauty and youth. And now, I said to myself, I can tell him that I have discovered a corner in the world where one may walk quite naked in the sunshine, and without shame, even of one's imperfections. I continued to walk, intoxicating myself with the air and sunlight, but I was no longer alone. There were inquisitive people around me, possibly sympathetic, but I was not sure of them, and I began to fear that, after all, the world was returning to torture me again. There was only one, a Chinaman, of whom I felt sure, for he followed me in an ecstatic dream and seemed to wish to kiss my feet every time they touched the ground. He had understood my way of celebrating the worship of the sun, and he followed me like a great artist or a great child, to be at my side to help or guide me. He was disturbed, as I was, at the crowd, not knowing whether or not they would spoil everything. "Could we not find a corner where we could be quite alone?" Saying this to him, I saw before me a superb avenue where the sun seemed to play through a kind of golden foliage. The Chinaman (I do not know whether he really had the traits of that race or whether it was simply a label applied to him in the dream) then made a sign that he understood and that nothing could be more favorable than this avenue. As soon as I entered it the crowd disappeared and I could more easily abandon myself to the joy of nakedness and freedom. But now I was no longer walking; I was dancing, or rather flying, near the tops of the trees, with dance rhythms in the air, seeking to leap forward and ever higher. It was a combined flight and dance, with half descents and bounds (I do not recall having had this sensation before), and with a laughter more delightful than that of humans. The Chinaman continued to follow me in ever greater ecstasy, seeming to fear nothing but my fall. At a little cry of mine he anxiously asked what was the matter. "It is nothing," I said, "only some holly." I had got into a clump of holly, very highly situated. But I once more bounded into the air. Then the dream was suspended and completely changed its character. I was on the ground again and with a cloak around me, and a procession of acrobats, giants, dwarfs, hunchbacks, and jugglers passed before me, apparently emerging from the avenue. The dream had been delicious at first, but it gradually took on a rather nightmarish character.

I may conclude this series of flying dreams with one by another subject, a woman medical student aged thirty. I here summarize the dream.

DREAM CXVI. She had been spending the evening with a man to whom she felt a strong attraction, and had been smoking rather excessively. She took tea on going to bed. In the early part of the dream she is waiting, a little impatiently, for a man who, the last time she saw him, wished to make love to her but for whom she felt no response. He appeared, and the dream continues in the subject's words: "With him there is a boy of eight or nine years of age. He is a beautiful bronze color, like some Indian, brown eyes and hair [she recalled later that he was like an attractive picture she had recently seen of Otto Braun as a boy], and is absolutely naked. I admire him intensely. I talk to him and he replies in a deep musical voice. Then my favorite brother comes on the scene and admires him, too. He puts his arm round him caressingly and touches the boy's penis. I am worried and wonder how I can tell him to desist without attracting the boy's attention. Then I am relieved for my brother has stopped. They fade away. I still seem to be in the same place. I hear the noise of an aeroplane (they always fascinate me) and run to look at it. I see it take a dive and am horrified. Then I see it again with relief. The scene changes. I am in a field with several other people and a number of men are flying, but instead of aeroplanes they have wings, strapped to their waists, which open out as they fly. They offer to let me and other women try. The wings are strapped on and we start running round a sort of course. Soon I feel my wings have caught the wind and I soar most deliciously for a few moments. Then I come down again. I try hard by running round to rise again but the wind always seems wrong. The wings are taken off and we hand them on to a fresh crowd of people.

Before summarizing the results of these dreams of flying it may be helpful to refer to the most instructive investigation of this dream-type hitherto made. Mourly Vold, whose posthumously published work in experimental psychology, *Ueber den Traum*, is a classic in the study of dreaming, by the methodical care with which it was carried out and the scientific caution in the statement of its conclusions, devoted a certain amount of attention to flying dreams.*

Mourly Vold definitely associates flying dreams, not only with unsupported soles of the feet but with respiration (though respiration of a light and agreeable kind), even as a *sine qua non*, but he admits he was not able to bring forward objective evidence of this association. He also attaches a certain significance to flexed extremi-

* Professor J. Mourly Vold, *Ueber den Traum*, 1912, Vol. II, pp. 791 et seq. He makes no reference to Freud, and his observations (from 1876 to 1897) were of earlier date than Freud's writings. They had not appeared when I published *The World of Dreams* in 1911.

ties which he had sometimes found associated with these dreams. It should be noted that Mourly Vold was well aware that the sleeper is constantly subjected to a great mass of stimuli, motorial and others, of all kinds, so that only the most powerful of these can pass the threshold of sleeping consciousness, thereupon using their predominance to effect a harmonious psychic coördination with the other conditions.

The most powerful motive to flying dreams Mourly Vold found in vibration, not of the limbs but of the body, and especially of the loins. The activity thence arising, he regarded as "obviously of sexual nature." The muscular vibrations are of the same nature as those which in a stronger degree produce actual detumescence; but they arouse more vaguely voluptuous and sentimental emotions, and these express themselves in a flying dream. So that, according to Mourly Vold, it is rare for such dreams to accompany actual orgasm but common for them to precede or follow it. He states that during some twenty years he analyzed twenty-five flying dreams of his own. In fifteen of these he was able to observe some degree of sexual vibration on awakening; in the remaining ten he noted no such manifestation, but he considers that as these mostly belonged to an early period he may possibly at the time have failed to detect it. He regards such dreams as being most frequent in youth and in the convalescent period after acute illness. He legitimately argues that the feelings, not only of enjoyment, but of pride and self-complacency which accompany the dreams are further evidence of their erotic origin. He also makes the interesting suggestion that the typical witches' dream in old days, of riding on a broomstick to the Devil's Sabbath, may be regarded as an erotic flying dream conditioned by the special superstitions of ancient times.

It might have confirmed Mourly Vold's opinion on this point if he had known of any folk-lore evidence of the erotic significance of flying dreams. This has been supplied by Professor Seligman who has lately stated, on the authority of a personal communication from Dr. Röck, of the Vienna Museum, himself Tyrolese, that in Tyrolese folk-lore the flying dream is regarded as a preliminary to a sexual emission.*

These observations of Mourly Vold's, thus confirmed by folk-lore, I regard as carrying great weight. They are not responsible for the modification which has taken place in my own view, for that occurred

* C. G. Seligman, Presidential address on "Anthropology and Psychology," *Journal of the Anthropological Institute*, Vol. LIV, 1924, p. 44.

earlier when, in the light of the Freudian conception, I re-surveyed my own experiences and found reason to believe that I had overlooked an element which, while far from being so clear as in Mourly Vold's experience, was yet traceable—to a degree that caused me to feel surprise I had not suspected it before—to a sexual source. But Mourly Vold's evidence is decisive for at all events the possibility of the occurrence of this factor in flying dreams, and the more so as he was by no means an investigator with an *a priori* determination to find a sexual causation of dreaming.

Freud's slight discussion of the matter, while highly suggestive, carries less weight, if only for the reason that he gave a less detailed and scrupulous attention to the matter. He discusses flying dreams in his great book on dream interpretation.* Stanley Hall would have found an atavistic origin for flying dreams in the experiences of the ape-like ancestors of men when they flew from branch to branch among the trees. Freud finds the explanation, not in the early experiences of the race, but in the early experiences of the individual, when as a child he "flew" into his uncle's arms, sometimes in these movements, he adds, sexual sensations being aroused. No attempt is made to prove that such childish experiences are associated with later dreams of flying, or even to prove that in their absence dreams of flying fail to arise, though evidence of this kind would obviously be valuable. Yet Freud regarded this speculation as "good ground" for rejecting the evidence (now here made more definite) that the conditions of the sleeper as regards skin sensations, respiratory state, etc., are able to evoke such dreams.

Some years later, however, in his lectures on psychoanalysis, Freud very briefly touched on dreams of flying, and other typical dreams, in a way that suggested that he was no longer able to speak so definitely on the matter, and was willing to leave the interpretation of such dreams to the gradual widening of our comprehension. His discussion of the matter was slight and hardly satisfactory, but it was suggestive. It sufficed to induce me to review my own experience and seriously to revise my interpretation of these dreams long before I saw Mourly Vold's book.

It is now possible to realize the significance of the flying dreams in the present series. As they are presented in full it is enough to sum them up briefly. There are nine (eleven if we count the two similar to CX, but not recorded in detail) of them, all but one in the

* *Die Traumdeutung*, 3rd ed., 1911, pp. 201-4.

same dreamer, and all in women. In one there was no traceable cause but a desire to urinate on awaking; in two (really four) there was obvious respiratory trouble due on one occasion to a sore throat, and in the other to inability to breathe through the nose. In as many as six (even seven if we include a dream that occurred during menstruation and may possibly therefore be of sexual origin) the dream either contained sexual suggestions or else, and more usually, was accompanied by definite erotic feelings; and in one of these there was also at the same time respiratory trouble. There are thus only one or two dreams of the group that we cannot account for. We are justified in believing that in some dreamers, in a most pronounced way, flying dreams are erotic. We are also justified in believing that this is not the only factor in flying dreams, but that in the absence of the sexual factor, the respiratory factor is amply effective. Finally it is seen that the respiratory and sexual motives may act together.

A consideration of this group of dreams, I am now convinced, thus amply justifies a modification of the view I put forward in *The World of Dreams*, confining the causation of such dreams to disturbed or excited rhythm of the chest or heart. Accurately speaking, it is not so much a modification as an extension of that view which is required, for sexual activity also is ultimately a muscular rhythm. The original view that a flying dream may be purely respiratory is decisively confirmed by such dreams as CX and CXIII which were accompanied by definite obstruction to respiration in the nose or throat. The view of Freud that flying dreams may be associated with sexual excitement is confirmed by the definite occurrence of the phenomena of flying in what are distinctively erotic dreams. Moreover we find—and in two dreams—the coincidence of respiratory phenomena and sexual phenomena in the same dream, indicating an “over-determination” (to use the Freudian term) of visions of flying by two allied classes of muscular rhythm operating in association. Further evidence scarcely seems necessary, for it would hardly be possible to adduce any more precisely to these points.

Vesical Dreams

This group of dreams resembles the group of flying dreams in raising a similar problem as to the question of sexual origin. The point of view that we shall here find reason to adopt is that in sleep, as we know also to be the case when awake, sexual excitement is aroused or increased by the pressure of a full bladder, but that the impulse of urination, being fundamentally a primitive and distinct

instinct, can act independently, exactly by the same right as the impulse of sex, in constituting dream activity. The present dreamer, as has been pointed out, having a readily contractile bladder, is peculiarly liable to dreams in which urination is prominent, so that we may expect to find illustrations of various types of vesical dreams in her experience. It is important to note that there is no history of enuresis in childhood. It seems, therefore, of interest to record a few more of her dreams in this class, noted down during the three or four years following the series already here recorded.

DREAM CXVII. *I cannot remember how it began. I only know that I am practicing urination in front of F., and that it pleases me infinitely. He seems to be in a corner of the room, and we are laughing and joking together. In the dream I see myself lying flat on my back, or at least I know that I am in this position, and a huge fountain rises up almost vertically and with prodigious force. Then I am standing though I still do not see myself, the jet alone being visible. Suddenly I draw F.'s attention to a buffet with glass doors provided with curtains midway up the window; all along the panes golden pearls are dropping, seeming to detach themselves from the curtain, one by one, and well-rounded. I call F.'s attention to them, though I do not recall speaking; it is all very vague, and we laugh at the sight. It is my fountain which has scattered in golden drops behind these curtains. We are full of admiration for these pearls to which the sun, penetrating into the room, has given the golden tones. All the panes of the buffet are glistening with gold. The curtains seem of the same color, and everywhere gold is streaming and falling in drops. It is fairy-like. Then I wake, greatly wanting to urinate and also with a strong longing to masturbate, which I did, and some time after urinated very copiously; it seemed very hot.*

DREAM CXVIII. *I have had a delightful dream with rivers of flowing water. I was hunting for a pretty sight of my childhood, a water mill, for me full of dazzling magic. I was in my dream going to this mill with some kind but vague companion, and asking everyone where it was. I was always following water, for the most part swelling and impetuous, and sometimes as in a mirage, and from the top of lovely hills I could see the mill in the distance in a glory of glittering water. Copious urination on awaking.*

DREAM CXIX. *I arise to urinate and do so largely. On returning to bed and sleep I dream that I am in a shop buying a hat; a shopman shows me one, a fancy Tam o'Shanter, and I declare that it will never suit me. But on putting it on I find myself very pretty, and I place the corner at*

different angles, pulling here and there, making one or another lock of hair appear, turning before the glass under the eyes of the man, who approves. Then I try a sky-blue velvet ribbon round the Tam o'Shanter but it does not suit it. Suddenly I see the shopman, who is strangely like my grocer, leaning over his counter and whispering mysteriously to a pretty little lady close to me, "She [that is to say I] will tell you how that goes; she bought one of them the other day." I understand that it is a syringe for very intimate injections, and I protest, a little embarrassed, that I have not it with me; but, smiling in a cunning way, the tradesman to my great astonishment points to the instrument in the basket on my arm. It is in fact there, brilliantly new and exposed in all its nudity. Very surprised I exclaim, "I must have left it in my basket all these days." The tradesman very affably hastens to say to us: "If the ladies would go to the back of the shop it would be easier for them to show how it works." We are now in a pretty little room like a hall, apparently at the back of the shop, where I feel it will be easier to explain than in the shop before a man, but to my horror I suddenly see that my grocer is still there, although he makes himself small and is always very obsequious; he never leaves us for an instant. He is seated on the last step of an oak staircase behind us, and is of course listening without seeming to, and always preserving his polite tradesman's smile. He makes me feel horribly uncomfortable but I begin my explanations in a firm voice and scientific manner. The lady is seated before me, a large black hat shading her face; I am turning my back to the grocer. I explain, "Here you place a tube which goes . . ." I see the tube but the explanation is confused. I cannot explain where the tube goes and I try vainly to convey the idea of a tank of water. There is another tube which also goes towards the water; I see the water but my explanations are not forthcoming; I am awkward and cannot explain what I want to. But suddenly I see the sexual parts of a woman opening like a flower. Whether they are my own I do not know, for now I only see delicious fountains arising, I know not whence, but without doubt from me, for I am covered with the drops which fall back.

I am cold; I awake to cover myself; I still want to urinate, but more moderately; I do not do it, however; the dream is so stupid that I get into bed without doing it in order to see what will happen, but nothing happens.

DREAM CXX. In the first part of the dream I had been vainly waiting at a railway station for my sister. After having seen many trains pass, I said to myself: "It was ridiculous to invite her when she is just starting for America; of course she is very busy and has gone out shopping." Then the idea came to me: How does one translate into French "she has just gone out shopping"?—"Elle est partie faire des courses." And

therewith I am logically transported into my classroom, making my pupils translate, "She has just gone out shopping." The head master is in the room, grave and solemn. He says, "Now, now, what is the French for that sentence?" Suddenly I feel a terrible desire to urinate. What can I do? Brilliant idea! I will sit on one of the benches as I often do, and then I will let it all flow. But I shall have to raise my skirt; I skilfully do so and sit down with assurance and dignity. There are spaces between the boards of the bench. It comes! What a torrent, what a noise, and what a relief! In spite of myself an expression of beatitude passes over my face. The children must know nothing, so I repeat in a very loud voice, "Elle est partie faire des courses," and the head master, who has mentally changed into my friend F.—although in appearance he still remains the head master of real life—this ambiguous F. becomes my accomplice, repeating in a very loud voice: "Voyons, mesdemoiselles, elle est partie faire des courses." But I cannot keep it up, the noise is too terrible, the cascade too impetuous, and my happiness too great; in spite of all F.'s affectionate little signs of encouragement, I am silent and given up to my enjoyment. F. tries hard to drown the sound, he talks loudly, he is agitated, but one terrible little girl has discovered everything by leaning over, and while F. continues to repeat, "Voyons, mesdemoiselles, elle est partie faire des courses," and I at last stand up, our pupils are all leaning over towards the pool and pointing it out to each other.

Then I wake with a feeling of laziness, astonished that I have no wish to urinate, and wondering whether in spite of appearances it was really a vesical dream. I half turn round and fall asleep on my stomach to a new dream which begins with a slight caress at a region so excited that it must after all have wanted to urinate as it always is so when one wants to badly. I say to myself, "I would like to be whipped a little, that would be delightful," and I raise my nightdress. A light hand seems to give me two little slaps and then wander over my buttocks. I can no longer contain my enjoyment. I am shaken by great thrilling movements. I awake in the midst of an orgasm; my nightdress is raised but my hands are not near, so that I can hardly believe that I raised it myself, though I am not sure. Anyhow I then had to urinate.

DREAM CXXI. It seems to me that there was a green and soft lawn and near this lawn a small cottage. My mother and I and a third person (who was vague but I think a woman) were on the lawn and were much worried how to undress and go to bed (though there was no bed there). Our worry was due to the cottage being inhabited by a witch who seemed to be able to see everything and whose chief concern was to torment people. One of her tortures was to prevent rest. I cannot recall actually seeing the witch but I felt her as a constant presence, wicked and obsess-

ing, small with a crooked chin, extremely swift and active, able to see everything and to know everything. By what miracle we had escaped her vigilance I cannot tell. But anyhow we succeeded in undressing and concealing ourselves beneath the flowers, my mother beneath a rose, a single great red rose on a bare, slender rose-tree, without any other flower or any leaves, and I under another rose, I think, but am not sure, while our companion seemed to have disappeared.

Our flowers, however, were not a protection for long; the witch saw us and prepared our punishment, which was to consist in an avalanche of water suddenly falling on us from above. A benevolent spirit (also felt but not seen) wished to save my mother and suddenly her rose and rose-tree began to grow until they reached fabulous proportions. I had the feeling of being drawn up from above, while I saw the rose-tree growing as if magic fingers armed with a magnetic fluid were making it rise and rise and rise. I was wonder-struck and I believe that my rose-tree, too, was growing (although that is vague), but suddenly, coming from above, a flood of clear rustling water fell heavily on my mother's rose-tree. Poor mother came from under her rose, falling like an ant beneath the gale, and like an ant she was small and frail and of course dripping with water, a dress of black taffetas clinging to her body and shining with reflections of silk and water. I seemed to have escaped the flood; my only anxiety was my mother and my fear lest she should catch cold, etc. I awoke and had to urinate.

The evening before I had been reading the chapter on magicians, kings, and gods in Edward Carpenter's *Christian and Pagan Creeds*. It may be remarked that "*aller cueillir une rose*" (to go and gather a rose) was formerly in France, as the English equivalent in England, a politely familiar euphemism for to go aside and urinate.

DREAM CXXII. I dreamed that a troop of comedians bearing the name of my own family, of whom it chiefly consisted, was giving a representation of some old-fashioned play and I was very anxious that it should be successful, since, though not acting myself, the reputation of my relations was at stake. I was in the audience. The play must have been Greek, and was acted, as it ought to be, in an open theater with seats in a semicircle on a hillside. The actors down below looked small and their efforts seemed to me rather to miss the mark. I was afraid this great drama would not be finely interpreted by these people who were so dear to me. My anxiety was great. Suddenly my friend F. appeared on the stage as one of the troop. He was dressed as a hunter, carrying a kind of primitive rifle with a great beard spread fan-like, looking fierce and terrible and puffing in a frightful way to imitate the noise of the rifle. His cheeks were puffed out like those of a cherub when represented as blowing to produce the North Wind. Everyone thought how silly he

looked, but after a moment's hesitation I disagreed with everyone, thinking that no greater artist had ever been born and that this realistic way of imitating the spitting crack of a rifle could not be surpassed.

In place of an altar in the middle of the stage was a small building looking like a Y.M.C.A. hut and reserved for lavatories. Between two acts I decided to disappear there and found at the end of a long corridor a closet where, standing over the seat and slightly bent forward, I let fall a great stream. Coming out in the corridor I found that I was not yet relieved and looking behind I saw another closet which, however, did not seem inviting, so I resolved to empty myself in a huge foot-bath on the floor in the corridor. This I did in a standing position, legs each side of the bath and skirts held up thinking how enormous these streams were. Then I awakened with an urgent desire to urinate.

DREAM CXXIII. She dreams that she is with an early boy friend P. He has done something wrong in his French lesson. His punishment is to be changed into a fish, rather like a haddock, but very large, and to swallow an enormous quantity of water which he must retain; if he fails to do so he will die. The water seems to come from a spring or waterfall and the fish is placed underneath it with gaping mouth trying to catch it all. All the time the dreamer is conscious that the fish is P. and that she must save him from death as she is fond of him. But he is unable to retain the water which flows out from near his tail. He wriggles about and is very wretched, as is the dreamer. The only way to save him if he cannot retain the water is to collect it in a bucket as it flows from his tail, and not a drop must fall outside the bucket or he will die at once. In her anxiety the dreamer puts him in the bucket, holding him under the stream and watching the bucket getting full, frightened lest it should overflow, and perpetually changing the bucket as soon as full. Then she awoke with a desire to urinate.

The same dream—almost identical in details—had occurred to her once, and she thinks twice, before. Most of her vesical dreams are pleasant, but this with its anxiety and the disagreeable sensation of touching the fish was unpleasant.

The next dream, dating some two years later, is the last of this group recorded.

DREAM CXXIV. I was with my friend F., very happily and lovingly walking in the country, and suddenly I wanted to urinate. F. said to me: "Nothing easier; there is no one about; you could even raise your skirts." So I stood with raised skirts, and the stream jetted forwards just like a boy's, and I enjoyed it like a mischievous boy. The wind suddenly raised my skirts behind, though without wetting them, for I held them firmly, and at the same time by its force drove the stream to one

side, in what seemed a deliciously playful way, so that I had to make a sudden movement of the hips to bring it into a straight line again, and even at the same time, just like a boy, I seemed to use my hands to guide it, as though furnished with a boy's little apparatus. The wind repeated its game, and I mine, several times in succession, to our great amusement, for it seemed as if the stream would go on forever. Then the scene became vague, the operation ceased, I dimly saw people in the distance and wondered if they had been able to see me. Then I lost sight of F. and went in search of him.

It will be seen that, with the eight supplementary dreams, the present series includes twenty-two dreams of vesical type. This is possibly the largest series of mostly consecutive dreams of this type so far brought forward, and it may well enable us to form fairly certain conclusions concerning such dreams in their broad outlines. They form, we may well be entitled to believe, an unusually large proportion in the dreams of this subject, and that not because she belongs to the urolagnic type, abnormally sensitive to what I term Undinism—although that may be so in a slightly and scarcely abnormal degree—but simply because of an acquired irritability of the bladder, the result of childbirth. This fact is, however, itself instructive. It enables us to realize clearly—what surely might have been suspected—that the vesical dream exists in its own right and is not a disguised form of some other type of impulse.

Many years ago Jung stated dogmatically that the vesical dream is in children an infantile sexual surrogate and in adults the garment of a sexual impulse.* In other words, whether as substitute or disguise, the vesical dream is always erotic. It is probable that Jung has since modified that view. He has perhaps realized, at all events, that the impulse of vesical contraction is often of imperative urgency, and that no day-dreams about a sexual-surrogate are needed to account for it. But this view is still worth noting, as perhaps not yet entirely extinct. The wide survey afforded by the present investigation shows us that, for ordinary vesical dreams, no such far-fetched explanation is demanded. We see that in a subject whose erotic dreams are very plain and undisguised, vesical dreams form, for the most part, a distinct class and they form a large class for a definite reason which involves no sexual factor. It were strange if it were otherwise. We are concerned with an excretory function which is zoologically more ancient than sexual conjunction and is capable of existing in the

* Jung, "L'Analyse des Rêves," *L'Année Psychologique*, 1909.

absence of sexual organs. The supposition that it has no psychic autonomy is too fantastic for serious consideration.

I have, however, been careful to point out that while vesical dreams inevitably form an independent class, we cannot say more than that they are "for the most part" distinct from other classes. They are without doubt often closely connected with sexual impulses; that fact is as inevitable as their fundamental independence. In both sexes the vesical sphere and the genital sphere are bound together. When an impulse arises from one of these spheres there is always a possibility that it may involve the neighboring sphere. Whether it does so, and how far it does so, naturally depends largely on the condition of that neighboring sphere and the extent of its irritability at the moment. In one direction it is a fairly familiar fact, both to men and women, that a full bladder heightens sexual feeling, while, in the reverse direction, it was known even to Brantôme, four centuries ago, that in a woman sexual orgasm may occasionally cause sudden and involuntary expulsion of the contents of a full bladder. These phenomena of waking life occur, as we should expect, on the psychic plane of sleeping life in a much more vivid, dramatic, and picturesque way than is possible in waking life, for now the mind is on its receptive side in delicate and precise adjustment to the stimuli that reach it, without being liable to deformation or repression, in one direction or another, by inhibiting influences from its own higher controlling centers. The facility of association between the vesical and sexual centers is probably, it seems to me, indicated by the usually pleasurable and sometimes romantic character of vesical dreams. There seems no obvious reason why a purely excremental somatic need should become idealized and pleasurable before its fulfillment. As a matter of fact, the dreams aroused by the need for defecation (and those that proceed from the gastro-intestinal canal generally) do not seem to be idealized or to become pleasurable (see, for instance, the three dreams of this kind in the present series, LV, LXX, LXXXII) and this is intelligible when we bear in mind that little or no involvement of the sexual sphere is here possible. (The anus comes within the sexual sphere, but the anus is not here involved.) In the dreams of the present subject, it will be noted, vesical dreams follow closely after erotic dreams and flying dreams (which we have seen reason to associate in many cases with erotic dreams) by the large proportion containing elements of a romantic and pleasurable character. There are many indeed which are not of this character, and these we may perhaps regard as of more

exclusively excremental origin, not involving in any degree the sexual sphere. About 12 out of the total of 22 may be said to be of this character, and were either commonplace, as when a water-tap is seen or a bath or visions of children urinating, or else actually distressing as when alarming floods seem to be taking place. The rest, of which five (3 per cent in the original series) were definitely erotic, are of pleasurable and often charming nature.* The subject is enjoying the spectacle of fountains and rivers and lakes in Nature or she herself is urinating copiously and sometimes producing fantastically beautifully fountains. There are three of this last type (which occurs in the dreams of other women) and one of them erotic. Another of them must be specially mentioned (CXXIV) because it belongs to a type of dream otherwise unrepresented in this subject's dreams.

The tendency to adopt the mental attitude and habits and costume of the opposite sex is one that I term *sexo-esthetic inversion*, or, more simply, *Eonism*. It is a tendency which, in a slight degree, is found in otherwise perfectly normal people, especially girls and young women. I have elsewhere described a case in which it existed only in the dreams of a young married woman. The present subject, Madame N., has shown no clear trace of this tendency, either in waking life or generally in her dreams. But in this dream, which stands alone, we find a distinct trace of this tendency emerging, and the dreamer imagines herself as urinating like a boy and finds great pleasure in so doing. It may be noted that Adler has already referred to this practice in girls, or the attempt at it, as a common indication of what he terms "*masculine protest*," though it must not be supposed that the adoption by woman of the erect attitude for urination is to be regarded as necessarily or commonly a "*masculine protest*."

When we survey the whole series of vesical dreams here presented we may see that they include nearly all forms, direct and indirect, realistic and symbolic, which such dreams tend to take. In five of them the dreamer pictures herself as fantastically or more prosaically performing the act; but in all the other dreams the act is either objectified or symbolized, so that there is no indication in the dream that the dreamer is herself experiencing the desire for it. In two dreams children are seen urinating. But in all the remaining dreams—some two-thirds of the whole number of such dreams, and as many as twelve out of fourteen of the original series—the idea of urination is never presented to dream consciousness at all. We may

* It is possible that some of the dreams classed as erotic (like Dream VI) may be of partly vesical origin. But we cannot say that a dream is of vesical type when it contains no actual or manifestly symbolic vesical elements.

say, indeed, that there is perhaps no class of dreams in which the underlying motive is more often concealed and presented dramatically and picturesquely in a symbolic form than in vesical dreams. The test of such a dream is, of course, the sensation of vesical pressure on awaking or the presence of an urgent desire to urinate. That was nearly always verified by the subject in the present investigation. But even in the absence of such verification, when we are once familiar with these dreams we cannot easily fail to recognize their vesical source. Rivers, fountains, lakes, reservoirs, baths, water-taps, fish, swans—such images, well illustrated by the present subject, seem to be those commonly called up to dreaming consciousness by a full bladder. That was noted as regards some of these symbols by Scherner in Germany in the middle of the last century, so it would seem that these symbols are largely independent of the subject's age and nation and rooted in the mechanism of the human mind.*

It must not, of course, be concluded that in ascertaining the somatic stimulus that arouses a set of symbols, even when these symbols tend to be widely spread among very different people, we have said all that there is to say. It is well recognized now that a dream may tell us far more than the source of the stimulus that evoked its symbolism. Even the symbolism thus directly evoked may differ widely, and differ significantly, in its character. Thus in another married woman, Mrs. C., of about the same age as Madame N., a frequent vesical dream is of being pregnant or in childbirth.† It seems an entirely natural vesical dream, the pressure of the bladder being interpreted by sleeping consciousness as pressure of the womb. But here an interesting and perhaps deeply significant fact emerges. Madame N., who has had two children, with difficult confinements, and therefore might be expected to experience such a dream, but who has no wish for more children, has no dream of this type to record; it is Mrs. C., who has never had a child but who would much like to have one, to whom the dream is liable to occur. This not only brings out clearly that it is not merely the nature of the stimulus to the dream, but the disposition of the dreamer on

* We do not find in this dreamer the association, which psychoanalysis (and it may perhaps be added folk-lore) might have led us to expect between vesical dreams and fire. (See, for instance, Ernest Jones, *Essays in Applied Psychology*, p. 306.) The dreams of the present subject introducing fire do not seem to have any clear vesical bearing.

† She writes, for instance: "Last night I dreamt again that I was having my much desired baby. I needed to micturate badly on rising; hence the congested feeling that started the dream."

whom the stimulus acts, which fashions the dream, but it also seems to indicate a great fundamental truth concerning the nature of dreaming. Dreams are not only based on the past, with its actual experience and ingrained impressions, they are also based on the future with its merely desired experiences and impressions. Dreams are not determined solely by a force from behind, but also by a force from in front. In a large number of dreams, even when the fact may not be immediately apparent, we are really concerned with a wish-fulfilment.

Dreams of Eating

Dreams of sexual and allied origin have of recent years attracted such wide attention—by a reaction from the almost complete neglect which was formerly meted out to them—and they have aroused so many interesting and debatable problems, that there is a tendency to neglect the dreams which have their source of stimulation in other organic impulses. When, however, we are concerned with the synthesis of dreams we are compelled to recognize impartially the whole of the sources from which dreaming proceeds. If we do this, it is not surprising to find that the great fundamental function of eating is almost as conspicuous as that of loving; if indeed we include the whole digestive process, the incidence is about the same. In the present series, against the 20 erotic dreams, we have 15 that are concerned with eating, and 3 of intestinal origin, in all 18. When, however, we remember that we have seen reason to conclude that the purely erotic group must be enlarged by additions from the vesical group as well as from that of dreams of flying, it may seem that food and digestion, which constitute so much more regular and constant an element in life than sex interests usually furnish, is inadequately represented. But, it must be pointed out, that is precisely the reason why eating plays a relatively small part in dreaming. It is the strong and irregular impulses that are likely to affect dreaming most conspicuously, while the constant and rhythmic action of the heart and lungs, so long as they are not stirred into unusual activity, fails to touch dream life. In the person of sound digestion, living a simple and normal life, eating in this respect tends to become more analogous to breathing than to sexual activity. No doubt there are individual variations, and in the dreams of another woman, in whose life, it may be, the question of food is more interesting, dreams of eating have a larger place, being 26 per cent.

It must not be supposed, however, that the food dream presents no problems.

Two of the food dreams in this series have indeed no obvious significance and no known relation to the actual condition of the dreamer's digestion at the time. But of the rest it is noted that 8 took place after a light or early supper, and 5 after a heavy supper, often immediately before going to bed. Two of the dreams of food after a light supper were merely a repetition of what had taken place during the day, and they may not, therefore, have had any reference to the dreamer's condition at the time of dreaming. The other dreams were either of preparing food or of seeing others eat or of being present at a meal or in a restaurant. It is probable that some of these dreams were associated with the actual readiness of the dreamer's organism for a meal.

It is well known that a state of hunger or of semi-starvation conduces to dreams of large and delicious meals. Examples have been recorded in the narratives of many travelers who have undergone privations.* Some have been brought forward by Freud, as well as by earlier investigators of dreaming, although, as Freud rightly points out, the significance of such dreams is not necessarily exhausted in the statement of their primary somatic source of stimulation. These dreams are, obviously, dreams of wish-fulfilment in its simple and direct, so-called infantile, form.

But, as we shall see, there are other dreams of food, which cannot thus be explained as dreams of wish-fulfilment. They form a large and common group, and they are conveniently ignored by the writers who believe that wish-fulfilment is the key that will unlock all doors in the world of dreams. We find that 5 of the dreams of copious meals, or of dining at a restaurant or of seeking a restaurant, occurred after partaking of a large meal or on going to bed immediately after a meal. It is evident that this group of dreams cannot be regarded as of wish-fulfilment. If wish-fulfilment is the rule in dreams then they must be regarded as exceptions to the rule. But, as Darwin was wont to insist, apparent "exceptions" are highly significant; they cannot attract our attention too strongly, for they indicate that our rule is not large enough, and that we need a more fundamental rule. It may be quite obviously true that the stimulus to the dream, in a large group of food-dreams, has been furnished by the wish for food. But a wish, it must be remembered, is a non-intellectual conation, outside the sphere of reasoning, and dreaming is essentially a process of *reasoning*—the fundamental process, that

* So also among half-starved war prisoners; see, for example, Dr. Amadeo dalla Volta, *Studi di Psicologia e di Psichiatria sulla Prigionia di Guerra*, Florence, 1919.

is to say, in the minds of men and other animals*—and the wish can only be an external stimulus which has chanced to set the reasoning process to work. When the organic state is that of hunger, the reasoning process, answering to the wish the organism transmits to it, sets up the appropriate mental process. And when the organism transmits an impression of repletion the reasoning process again begins to work. But this time it is not to fulfil a wish, it is to explain, which is an equally native function of the reasoning process. When a sensation of repletion is transmitted to the sleeping mind the natural mental reaction is a picture of eating, the dreamer imagines that he must be engaged in absorbing a copious meal, although—unlike the case of the really hungry dreamer—the picture may not be agreeable, and the food eaten sometimes seems unpleasant or disgusting, even filthy. This class of dream is by no means confined to the present dreamer. It may be found in the experience of many, if not all, dreamers, although its significance has not always been apparent to dream analysts. It may most easily be discovered in the dreams of those whose digestion is imperfect, especially when they have been tempted to indulge in a too late or too unwholesome meal.

The three intestinal dreams, which presented the act of defecation, were probably due to a slight impulse to the fulfilment of that act. In two of them there was slight colic on awaking, and the third occurred on going to bed immediately after supper.

The food dreams of this subject are confirmed by the experience of another subject—the woman dreamer just mentioned—of whose dreams I possess a very long series. Thus, on one occasion, she had indigestion and nausea from eating just before going to bed food which did not agree with her. On falling asleep she dreamed of large dishes of food which, although not hungry, she was eating, very slowly, in order not to waste it. Then the dream continued with the discovery of lice which she killed with much disgust. Here we see clearly how dreaming is fundamentally a process of reasoning. The message of repletion is sent to the mind which thereupon, to account for these phenomena, assumes the act of eating. But as absence of hunger is reported the mind is obliged to assume that eating is due to a sense of duty, and, further, in order to account for the disgustful feeling of nausea experienced, the mind argues that something very

* "Our conceptual logic," Jules de Gaultier truly observes (*La Sensibilité Métaphysique*, 1924, p. 28), "exists virtually in the mentality of other biological species than man. It is not reason, pure reason, which distinguishes man from other animals; it is, on the contrary, that which he has in common with them."

disgusting must have happened, and supposes it to have been the discovery of lice, a supreme symbol of disgust to the modern civilized mind. In other dreams of the same subject belonging to this group filth and excrement are introduced to account for the dreamer's sensations.

In my book, *The World of Dreams*, I endeavored to make clear the essential part played by the logical process of reason in all dreaming which goes beyond the mere presentation of disconnected images. It is common to speak of dreams as lacking in logic and reason, but it is actually the reverse; they are full of logic and reason. There is ground for bringing that fact forward in this place since the reaction of the sleeping mind to gastric repletion furnishes such definite evidence of a logical process. A *wish*—and especially a *wish for explanation*—furnishes the motive force in the elaboration of the impressions and memories present to sleeping consciousness. It is strictly a *conation*, the movement of an impulse in a particular direction. But it cannot furnish an explanation of the dream itself or reveal its mechanism. It is, if we like, the fuel; but it is not the engine. That is in the sphere of reason, and though we may often (not always) find the reasoning bad—sometimes wildly or fantastically bad—because of the limited, peculiar, or distorted nature of the material which sleeping consciousness has to deal with, it is still reason. If the logical process of reason could be abolished during sleep there could be no coherent dreaming at all, nothing but unrelated impressions and memories.

Dreams of Clothing

Dreams of clothing and dressmaking and embarrassing absence of dress may here be mentioned, since food and dress are to be considered as associated needs, alike resting on a physiological basis. The dreams in which dress is merely noted without becoming a guiding motive in the dream may be disregarded. We then find dress may be said to be an active part of the dream in 12 per cent of this series. I do not propose to discuss the various aspects of these dreams of clothing, merely remarking that the subject may probably be said to possess a fairly average and feminine interest in the subject of dress and that she frequently makes her own dresses. Bearing this in mind the part played by clothing in her dreams seems by no means excessive, being rather less than that played by food. It may be of interest to compare her in this respect with the other woman dreamer of whom I have a long series of dreams. This subject has

taken an active interest in dress and in dress reform; she is also rather unusually interested in food. In her dreams clothing (as well, it has already been noted, as food) plays a large part, in no less than 34 per cent of the dreams, so that with her, though interest in food is unusually marked, interest in clothes is even larger.

A certain amount of attention has been given by some writers to dreams of embarrassing absence of dress. In its typical and pronounced form it hardly seems that the dream of this type comes into Madame N.'s experience. There are, however, two dreams of undress (II and XXXII) and these are instructive as showing the origin of this type of dream. It is probable, indeed, that careful examination would usually reveal the real source of such dreams and that there is little need to devise any fantastic explanation of them. The dreamer really is in a state of undress, and it would be strange indeed if the consciousness of that fact failed at some moments of semi-awakening to penetrate to consciousness. Both these dreams, it is instructive to note, occurred on going to bed immediately after a hot bath, and one was accompanied by a sensation of cold ultimately followed by a reaction of heat and then became erotic; this succession seems natural.

Dreams of Traveling

It may be thought strange to introduce this group. There seems to be, however, from observation of many dreamers, good reason to believe that such dreams—with which I include dreams of preparing to travel and preoccupation with luggage—have, in a large proportion of cases, a common origin, which is really organic.

This need not seem surprising when we consider their number. In the present dreamer's experience we find that they account for 13 per cent of the whole number of dreams, so that dreams of traveling were more frequent than dreams of clothing and almost as frequent as dreams of eating.

No doubt a certain proportion of such dreams are simple memories, determined along paths which have no traceable relation to the dreamer's present organic condition, just as some of the dreams of food certainly are, and most of the dreams of dress. The present subject, during the war, in the years immediately preceding this series of dreams, had been obliged to undertake numerous journeys in France, sometimes under difficult and painful conditions, and memories of these experiences might easily recur to sleeping consciousness.

But there is a considerable group of traveling dreams which I regard as the rationalization by the sleeping mind of an actual organic condition of the blood vessels of the head and the nervous system. This can often be demonstrated. Thus in another subject, who had been living for many weeks far from railway trains and noisy thoroughfares, I have a record which is to this point: he went to bed and woke up with a slight headache and during the night dreamed that he was wandering about a busy thoroughfare where many trains were passing along, and he was vainly seeking to find one going in his own direction. It is fairly obvious that to sleeping consciousness the throbbing head recalls the vibrating railway train and finds in it the symbol, and the explanation, of the sensations actually experienced. In Madame N.'s records no note was made of the presence or absence of headache or other similar cause of the numerous dreams of traveling, with, however, two exceptions, but they happen to be crucial. These dreams (XLVII and XLVIII) occurred on two successive nights when quinine had been taken as a prophylactic before going to bed. It is well known that ringing of the ears, or pronounced pulsation of the blood vessels of the head, tends to occur after a dose of quinine, and its occurrence is specially noted in the record of the second dream. During both nights the dreamer was haunted by images of luggage or railway trains. There can be no doubt that, in our society, the railway train is a normal symbol of a throbbing heart. With the increase of aviation the aeroplane will probably tend to take the place of the railway train in this type of dreams.

It would be easy to consider other aspects of this series of dreams. That, however, the reader if he chooses, may easily do for himself. The object of the present study has not been to investigate a particular person, and still less to analyze a particular case. The object has been to illustrate a method. This has been rendered possible by the gracious and highly intelligent assistance of a charming lady who has condescended for this occasion to become the *corpus vile* in which *experimentum fiat*. Therewith, it has, I hope, been made clear that, while the value of dream-analysis remains unquestioned, there are yet certain pitfalls into which when too narrowly followed it may sometimes lead, and that an important complementary guide to knowledge is furnished by the method of what I have termed dream-synthesis.

THE PSYCHOPATHOLOGY OF EXHIBITIONISM *

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I. GENERAL CONSIDERATIONS

DEFINITIONS.—In exhibitionism we are confronted with a rather remarkable psychic phenomenon which sends its ramifications into many other psychic and social reactions but whose true significance is as yet but little appreciated by psychopathologists. It is well, therefore, to inquire into the genesis and evolution of this phenomenon, its rôle and meaning in our life, and the relation it bears to other psychic reactions.

Exhibitionism is ordinarily defined as the exposure by an individual of his genital organs, or other parts of his body, with or without the performance of sexual acts; and most frequently in public places and wholly out of regard for public decency. The forensic conception of it includes the indecent exposure of the person to public view, whether intentional or even if due to negligence, but excludes from the meaning of the law exposure made in private.

The medical conception, however, regards it psychopathologically, and defines it as the pleasure of seeing oneself in an exposed, nude form which frequently expresses itself in habitual-like activity of unmasking that in all essentials has the nature of a compulsion; this, whether occurring in private or public. What is emphasized here is the compulsive character of the reaction which marks it as being distinctly pathologic. This definition, therefore, excludes those

* From the Department for Criminal Insane (Howard Hall), St. Elizabeths Hospital, Washington, D. C.

instances of solitary or isolated acts of exhibitionism which are sometimes observed in normal people as a result of negligence, etc. For the latter condition Burgl (quoted from Wulffen, q.v.) has suggested the term "exhibition" as contrasted with pathologic exhibitionism.

The Evolution of the Sense of Shame.—Anthropological studies on the evolution of clothing bring out interesting points regarding the relations between nudity, clothing, and the development of the sense of shame. Bloch,(2) in a careful review of the subject, states that the sense of shame is not an innate characteristic, but is a specific product of civilization, and as such is peculiar to man and more particularly the clothed man. That nudity is natural to humans and that shame is not a primary sense is seen in the ease with which the civilized man accustoms himself to nudity when among savages, the feeling of being in the presence of nudity being no longer noticed after a quarter of an hour. The primitive races most often go naked and our (sexual) sense of shame is almost completely undeveloped in them. They have no "private parts" and they speak of these with complete indifference. It would hardly be reasonable to call them indecent.

A number of factors have combined to contribute to the development of the sense of shame. There is, to begin with, the physiological factor, observed even among animals, and is expressed by the efforts of the female to protect her genital organs against the undesired approaches of the male when, because of the periodicity of the female, the time is not propitious. Then there is the fear which the primitive woman often feels, of arousing disgust in the man, as when she is menstruating or when, for any reason, the genital or other organs are not clean; this being conditioned on the general idea that the genital-anal region, with its secretions and excrements, is an object of this disgust, for which reason it is often carefully concealed, particularly from the opposite sex.

However, it is only when they come to be associated with clothing that these physiological factors aid in the production of the sense of shame. Now, staining, painting, and tattooing of the skin may be regarded as primitive states of clothing, principally used as a means of sexual allurements, as evidenced in the exclusive tattooing of the genital regions among the savages, thus making that region markedly conspicuous; in its associations with phallic festivals and in the frequency with which obscenity and sexual symbols appear in tattooing. Tattooing further leads to the cultivation of many-colored clothing which serve to accentuate particular portions of the body and thus stimulate the sexual appetite of the opposite sex. The ornamentations which were previously on the skin are now placed on a movable appendage, thus allowing a far greater variation than was possible with tattooing and painting. As in the case with tattooing, the first and most primitive form of clothing was for the pubic region,

again for purpose of sexual adornment. Clothing for the purpose of concealment comes in later when the genital region becomes an object of superstitious fear and respect, seats of dangerous magic, which it was necessary to conceal to protect the onlooker from its evil influences, or, contrariwise, to protect the genital region from the evil glances of the observer. The jealousy of the primitive man might also have been another ground for clothing. In many races only married women are clothed, for she is the property of her husband, and to him clothing appears as a protection against glances at his property.

A further purpose of clothing was the accentuation and disclosure of certain parts of the body in order to stimulate the opposite sex. Clothing has a two-fold sexually stimulating influence: either certain parts of the body are especially accentuated or enlarged by the shape and cut of the clothing (the hip, the buttock, etc.), or else particular parts of the body (the breasts) are denuded. In the growing variety of sexual relationships continually demanding new allurements and stimuli, our love life found an open avenue of expression in the great variety of fashions, the innumerable possibilities of disclosure, half-concealment and semi-nudity, which offer many opportunities to the erotic imagination. As clothing in the course of evolution becomes a part and parcel of every day life of the civilized human, nudity becomes first unsuitable, and later immoral; that which is not a part of our daily conduct becomes prohibited and socially tabooed. To the original function of clothing as a sexual adornment, there is now added the function of concealment; but this again merely furnishes another source of sexual stimulation; for the constant concealment of a most natural phenomenon greatly intensifies our craving for it. Modesty and sense of shame in consequence develop as a social reaction against nudity. The sense of shame and its associated expressions—pride, honor, self-respect, etc.—may be regarded as the spiritualization and individualization of the crude sexual impulse. It controls our sexual impulse without at the same time preventing its expression. In the subtle interplay between the use of clothing as an adornment and sexual stimulus, on the one hand, and its function of concealing bodily nudity, on the other, the human psychic love life finds an opportunity for an endless variety of expression, the extremes of which are seen in exhibitionism on the one hand and in prudery on the other.

Exhibitionism Among Primitives.—It may thus be seen that much of the exhibitionism that is natural to humans has had its edge taken off, has been diminished or inhibited by the demands of culture and civilization, and because the society of to-day gives less opportunity for direct exhibitionistic expression, exhibitionism has become to a large extent vicarious. Among the primitive races exhibitionism was widespread and a part of the accepted popular standard, and this state persists even up to the present

time among less advanced peoples in the form of certain customs, dances, rites, ceremonials, traditions, and superstitions which give full expression to unmasked exhibitionisms. Thus, among the Muecker people of Koenigsberg a "cult" was practiced, consisting in the complete uncovering of the female body to the full view of the male spectators present; the presumed purpose of the cult being the development in the men of a better appreciation of the feminine beauties and charms, the enjoyment of beauty for its own sake. Among the same people, the chief priest, whenever bathing, and absolutely in the nude, would command a number of his disciples to attend to him similarly in the nude, ostensibly to wean the women attendants from the sexual and to lessen their sense of shame (Bloch, 2). Among certain groups in Albania there has existed until very recently the superstition that the lifting of the skirts by women, in such a manner as to disclose their private parts, would react on their enemy in such a way as to completely deprive the latter of the power of inflicting injuries on the people. However, as the remedy failed to bring about the reputed results—a number of women having been shot—the custom faded, its place being taken by more efficacious means of attack and defense (Steinmetz, quoted from Stekel, 15). Among the Slavonic people, exposure of the genital organs or of the buttocks is frequently an expression of contempt toward someone.

Exhibitionism in Mythology and Poetry.—Similarly, exhibitionism finds its expression and sanction in mythology and poetry. Rank, (12) in discussing the subject, recites the various legends which in naïve fashion, seek to justify self-exposure; as in the legend of the wretched leper who finds healing and transfiguration into Christ through contact with the naked body of a compassionate human being, or the healing of a leper by gazing upon the nude form of a pure virgin. It seems that the looking tendency in Saga and Poetry has the same basic motive as we find in dreams and neurotic symptoms and undergoes the same transfiguration. As in the latter, so in mythology, there is often expressed the sensation of restraint which the naked dreamer experiences, as if chained to a post before a crowd of onlookers, who seemingly feel no disgust at his nude condition; and the subject's apparent shame is interpreted as an evidence of repression of the original pleasure in exposure. On the other hand, just as in neurotics, so in mythology, disturbances in the organs of vision bespeak the idea of retribution, as a punishment for transgressing the normal functions of the organ of vision, and we find the same expressed in mythology in the idea of punishment by blindness, development of various eye abnormalities, the woman turning into a serpent, bodily disfigurements, etc.; or the love object may disappear and serve the same purpose as blindness by becoming the invisible.

Exhibitionism in Modern Life.—In a larger sense, any bodily display having a sexual motivation, even that expressed within the limits of propriety and in full conformity with accepted social standards, may be regarded as being definitely exhibitionistic in nature. Thus viewed, exhibitionism may be considered as a normal psychological tendency and is not always the pathological phenomenon that we find it in the extreme cases. Indeed, it is quite a normal phenomenon within very wide limits from the unadulterated exhibitionism of children who use it for sundry purposes to attain their tiny ends as well as forming a part of many childish plays, through the not at all infrequent and not always clandestine exhibitionistic episodes observed among growing boys and girls, to, finally, the adult exhibitionism which on the one hand manifests itself in many cryptic but socially permissible forms, and on the other hand finds universal expression in the normal love relations between the sexes, for here exhibitionism appears as a normal reaction and properly belongs to the physiology of love. Exhibitionism thus shows a remarkable tendency for transition from the normal to the pathologic, and the line of demarcation is often hard to draw. Sadger (13) thinks that in its psychological aspects it may be traced to purely phylogenetic causes, seeing that aboriginal mankind lived in the nude, a condition quite natural for the warm climate; so that now even with the marked change in climatic conditions it is permissible to speak of unmasking as a return to the past and as bringing to one's mind the memories of racial infancy.

Until about the age of four all children are plainly exhibitionistic, this twin-like combination to see and to be seen being quite common to all tots; thereafter, especially in girls, rearing and training succeeds in weaning them from the habit of displaying their genitals and the tendency undergoes considerable repression. This continues until puberty, when we again witness an explosive eruption of exhibitionistic tendencies, very subtly expressed to be sure and tempered a great deal by shame, shyness, and social taboos of all kinds, but markedly conspicuous none the less. In a sublimated form exhibitionism finds considerable social sanction, as in the instance of décolleté evening dresses for women and other styles and fashions, the mixing of sexes in bathing places, etc. It never ceases to be utilized by the adult woman. In addition to general exhibitionistic activities for the display of which the average normal woman is ever on guard, every adult woman is more or less conscious of what is the most attractive

part of her body, which she instinctively and in the most artful manner displays to her best advantage. In the intricacies of the feminine toilet there does not slip in the tiniest misstep unless well elaborated and fully applied; even the so-called carelessly unbuttoned button or the crossing of shapely legs is never done without intent. When girls and women in the face of the strongest winter onslaughts "forget" to fasten and shut the door, as, for instance, on the street railways, they indicate, if only in the unconscious, that their genitals are quite "open" for the adventuresome bon vivant (Sadger, 13). In men, too, exhibitionism is widespread, although not clearly expressed as such. The display of well developed muscles and shapely bodies by athletes, the parading of military uniforms, the pompousness and ceremonials of secret societies are some of the expressions of exhibitionism. Sadger speaks of smoking cigars and pipes as being symbolic of exhibitionism (hanging penis); as exhibitionistic, singers who are unable to display their art because of a pressing sensation around the throat, and therefore have to remove their too large collars when they are able to display their "throat phallus."

Then we also have social and intellectual forms of exhibitionism which may or may not accompany physical exhibitionism. Some humans there are who are so constituted as to forever push themselves to the front—the limelight seeker, the cheer leader, and the like—people who forever seek the admiration of the crowd; others with an abnormal craving to photograph themselves in every conceivable position and situation and display their photos in the most popular places. In the choice of many vocations there may be found an exhibitionistic component and sometimes exhibitionistic tendencies may influence and determine an individual's choice of vocation (White, Wm. A., 20). Certain professions, the artistic and the acting, for instance, are in their very nature exhibitionistic, and the not infrequently exhibitionistic display on the legitimate stage satisfies both the actor and the patron. Sadger (13) thinks that we are even justified in suspecting hidden exhibitionism in individuals who have the inner compulsion to show things to other beings, even if these be only beautiful landscapes or pictures in the galleries; here one only has to think of the pederast who calls attention of his beloved to all kinds of things. Then, too, we think of married men whose motive in speaking praisingly of the hidden charms of their spouses does not lie entirely in vanity and bombast, nor even in the pride to open before others their secret treasures and charms, but not in the least

because it satisfies a craving for exhibitionism, only transferred upon more pleasant grounds; and it is more than a mere coincidence that this is usually expressed in the presence of a friend or friends with whom the exhibitor is in a homosexual love; in the place of unmasked and nude phallus the exhibition utilizes one's dearest possession: the sweetheart or the wife (Sadger, 13).

Finally, there is psychic exhibitionism. The individual may be loud and outspoken, not in the least embarrassed by his weaknesses, but rather proudly proclaiming them before the world. Herein are further included other types of exhibitionism, such as the writer of obscene letters as well as the individual who compensates for personal psychobiologic inferiorities by boasting of imaginary achievements. Autobiographies of many writers have much in them of psychic exhibitionism, as in the instance of J. J. Rousseau, who in his "Confessions" has painstakingly and minutely revealed to the world his various faults and shortcomings. In its highest forms psychic exhibitionism constitutes one of the roots of poetic and creative genius (Stekel, Wm., 18).

II. THE EXHIBITIONIST—A CLINICAL PICTURE

Exhibitionism, a Disease.—As a pathological reaction exhibitionism is a very widespread phenomenon and far greater in extent than is ordinarily supposed. It may occur either as an incidental or partial reaction in the course of well-known psychoses, or as an entity and a particular type of compulsion. One would hardly attach any psychopathological significance, *per se*, to the exhibitionism of a feeble-minded or a senile or parietic dement, untidy and soiling, of the manic-depressive in an excited stage, etc. Hence, such information as that furnished by Seiffer (quoted from Wülfflen, 21) to the effect that 75 cases gathered from the literature (64 men and 11 women), included 18 cases of epilepsy, 13 degenerative conditions (whatever that means), 10 dementia, 7 imbecility, etc., is scarcely of any value to us. The type of exhibitionism that is particularly significant psychopathologically is the one that is quite universally observed in neurotics, in whom it expresses in a specific manner a specific underlying difficulty of which it appears to be a symbolic equivalent. As such it may occur singly, as an isolated phenomenon, or in combination with many other symptoms.

Let us now take a glance at the literature of the subject, and from the rather meager material available reconstruct a synthetic picture of

the exhibitionist as an individual, the manner of man he is. It must be stated from the outset that in exhibitionism we are dealing with a disease, with genuine pain and suffering, and not merely with incontinence, and that the exhibitionist is always a sick, very sick person. For one cannot deal with these individuals and learn of the agonies they endure and the anguish under which they live without realizing that he is dealing with truly sick individuals.

Personal History.—Quite often we find the patient to be a young man of rather good native intelligence, high culture and education, and not infrequently from the better social strata. Women are much less frequently given to exhibitionism, partly, perhaps, because they have more opportunity and larger outlets to express their exhibitionism through acceptable social channels, and partly because the castration complex so frequently present in women appears to exercise a modifying influence that seems to check or neutralize what narcissistic and exhibitionistic tendencies there may be present, and develop in its stead, as a definite reaction, excessive modesty and shame.

The family history may be quite negative, but not infrequently it is rather heavily tainted, and strikingly enough one finds that some other member of the family—father, brother, etc.—was subject to the same compulsion. The early childhood and later adult history of these men may sometimes appear on the surface to be quite free from any significant episodes and lead one to think that he is dealing with a rather normal individual “whom no one would ever have suspected of doing such a thing.” More frequently, however, the reverse is found to be true, and a careful search will invariably reveal the presence of distinct neurotic components. These comprise, on the psychic side, distinct homosexual leanings, suicidal tendencies, hysterical out-breaks, confusional attacks, fixed staring and other behavior anomalies, and on the physical side a host of features—twitching, vertigo, congestion attacks, analgesia, palpitation, etc.

Organic defects are not constant, and when present do not appear to play either a dominant or contributory rôle. Stigmata of degeneracy may or may not be present, most often not. Here and there one finds small or undeveloped penis, deformed or atrophied testicles, etc.; again, the sexual organs may be abnormally large and well, even excessively developed, and this in people admittedly impotent. As a rule, however, the physical findings are quite negative.

Personality Make-up.—As to the personality make-up of these individuals nothing can be said that is specifically characteristic of

them. Their make-up is as varied and variable as the neurotic the world over, and one is as likely to find among them the open type as the very seclusive type. Many of them appear outwardly quite normal, but they are very secretive and bashful, carefully hiding their exhibitionism and other sexual difficulties so that even to their relatives and intimate friends the whole disclosure comes as a shock, for they had no idea of the "hell" their friends were carrying within their bosom. Again, others appear to belong more distinctly to the homosexual type of individual, most often of the latent variety. This will, perhaps, explain why the exhibitionistic act takes place before women, while exposure in overt homosexuals appears to be less frequent and they will expose themselves before men.

Sexual Life.—Their sexual life invariably shows marked pathology of one kind or another which, however, may often be so insidious in its growth and so subtle in its expressions as to escape ordinary notice and be discovered only after a careful study. Such study, however, reveals the presence of marked sexual abnormalities and irregularities, as, for example, complete abstinence, usually accompanied by excessive masturbation, frequent dreams with emissions, almost constant priapism not allayed by coitus, but from all evidences purely psychic in nature, absolute or relative impotence, ejaculation at the sight of women, ejaculatio precox or tarda, or sexual incompetence in one form or another.

Frequently in their very prime of life these individuals are often cold, even impotent in normal sex relations, there being found in them a history of marked decrease of libido growing for some years, so that they come to care but little, if at all, for normal sexual outlets; others are being referred to as "hypersexed," their sexual activity assuming a distinct pathological character. Oddly enough, not infrequently married men may be found in this group, fathers of many children and happy families, with apparently quite normal sexual lives during the lucid intervals; again, marital intercourse may not even openly satisfy their needs, from which it is reasoned that exhibitionism satisfies an urge quite different from that of normal intercourse.

Dreams.—Their dreams rather constantly express in quite an unmistakable manner their exhibitionistic tendencies, for dreams of exhibitionism with emissions are not infrequent. One will say that he frequently dreamed that he was running about with exposed genitals, or that, dressed in a nightshirt, he hung from a horizontal bar with his head downward so that the shirt fell down, exposing his

erection. Emission followed, and he would have a rest for a few days or an entire week. Another will dream of parading nude along the streets among strangers and attracting no attention from others; still others will dream of exhibiting themselves before young voluptuous women, thinking that this must be very pleasant to the women, since they themselves like so much to see the female genitals. One will dream that he is playing with a little girl who lifted her skirt and showed him her genitals, so similarly he unmasked his own genitals, placing his penis in her hand; she received it—at the moment he awakes having an emission. Another will dream that he is lying on the bed when his mother and girl enter the room. As he rises his genitals become visible to his mother but not to the girl. Some dream of unmasking their genitalia before children, etc. On studying these dreams it may be found that they are quite stereotyped with each individual, dramatizing and repeating certain episodes and acts of the past. Occasionally one will hear the exhibitionist spontaneously remark that his exhibitionism is merely an enactment in daily life of his phantasies in dreams.

Precipitating and Contributing Factors.—Exhibitionistic episodes as compulsive activities may come on as early as at five years of age and reach into the late senium, when inhibitions begin to fail and there is psychic regression to infantilism. As to frequency, it may come on quite often, even every day for weeks and months, or regularly every few months, or be limited to a few episodes, and even to only one episode.

The onset of the compulsion may be acute or it may break out after a period of latency. The onset has been ascribed to, or traced to, a variety of causes. Wulffen, (21) who gives a good descriptive summary of the subject, speaks of local irritation, as gonorrhea, strictures, prostatic hypertrophy, hemorrhoids, vesical tumors, intestinal parasites and systemic conditions, as diabetes and gout, as likely to induce habitual psychosexual hyperesthesia which may then lead to exhibitionism. Likewise, he thinks, some men arrive at exhibitionism from excessive mental fatigue, or as a substitute for normal sexual gratification to save money and because of fear of infection. It is not clear, however, how sexual hyperesthesia should lead just to exhibitionism and how the latter would allay the hyperesthesia; and to speak of exhibitionism as a normal substitute for sex expression is to greatly minimize the strength of the normal sexual urge. Leers is

nearer the truth when he says that a normal exhibitionist does not exist.

Others have ascribed the onset of the compulsion to a physical trauma of one kind or another, followed by a change in personality and the development of an epileptoid reaction; to some severe illness, to an apoplectic attack, or to a profound mental episode. In many cases it appears to have developed following the death of the mother or soon after a disappointment in a love affair; in other cases it has been attributed to an accidental (?) exhibitionistic act which later led to more deliberately planned activities, or to some striking incident as in the case of a youth who, while urinating, noticed that he was being observed by children and became in consequence of that sexually excited with resulting erection and ejaculation, later becoming indifferent to normal coitus and finding complete satisfaction only in exhibitionism.

Alcohol as an exciting factor does not appear to play a constant or important rôle in the development of the compulsion. In fact, it has been observed that a great number of the men are not drinkers, although it is true that with the taking of alcohol, they develop with increased intensity, the anxiety symptoms so characteristic of the reaction and are then overwhelmed by an irresistible impulse to expose themselves. Some seem to strengthen their courage by drinking, the impulse then becoming uncontrollable. There also seems to be some relation between exhibitionism and epilepsy (Stekel, 15).

Again, in some instances at least, the beginning of the compulsion has been observed to be consequent upon the cessation of epileptic convulsions, thus assuming the character of a vicarious phenomenon, perhaps of an epileptic equivalent.

While exhibitionism is considered to be in most instances a primary reaction, the activity proper may sometimes appear as being secondary or incidental to what appears to be a sudden impulsive desire for masturbation. Thus one youth stated that every now and then he would be seized with a very painful sexual excitement accompanied with an intense desire to masturbate. As he tried to oppose or resist the impulse he would grow hot, terribly frightened and apprehensive with a feeling of oppression in the chest, head burning; he would seem to be in a fog, although never quite losing consciousness. At such times he would have violent, darting pains in the testicles and spermatic cords and would have to masturbate, no matter where

he might be (v. Krafft-Ebing, 10). Others again find their only salvation from exhibitionism in masturbation.

Kraepelin (quoted from Wulffen, q.v.) thinks that exhibitionism is a phase of or a simple variety of masturbation. Naecke (quoted from Stekel, 15) thinks that exhibitionism is due to excessive masturbation which deprives the individual of all sense of shame. However, this becomes rather doubtful when we remember that the largest number of masturbants, which include, of course, the exhibitionists, are very bashful and reticent and quite loath to unmask themselves in the presence of others. Bloch, Freud, Merzbach and others (quoted from Wulffen, 21) regard exhibitionism as a weakened form of sadism and believe that in exhibitionism a sadistic trait is recognizable.

The Victim.—The victims are usually women and children, although occasionally some persons will expose themselves before men too, or even exclusively before men. The victim may be any passing woman, or a particular type of woman, as servant girls, or even one particular woman. The age of the victim does not seem to be a constant factor and the exhibitionist is just as likely to expose himself before young women as before old women and children, although some exhibitionists prefer small children, sometimes even exclusively—partly perhaps because of their helplessness and partly because exhibitionism is in itself a regressive reaction and reproduces infantile experiences. Men have been known to expose themselves before their own children, even bathing with them in the same bathtub.

Parts Exposed.—The part of the body usually exposed is the penis in full or partial view and less frequently the genital organs in entirety. The penis may or may not be erect. Occasionally, other parts of the body may also be exposed, such as the nates, thighs, etc. It is pointed out by Stekel (15) that the exposed bodily portion is always the seat of the strongest erogenic functions and that persons exhibit only the erogenous zones which they seek to view in others. Exhibitionism and "peeping" thus always go hand in glove, although one or the other component may be in ascendancy while the other is suppressed.

The Prodromal Symptoms.—While the act proper is described as impulsive and unconquerable, coming on in a sudden and lightning-like manner, it has been observed that somewhat previous to the oncoming of the attack, a most marked change is frequently noticed

in the individual of this type. For some hours and sometimes for some days previous to the commission of the act, they grow extremely, even violently restless and excited, become fearful and apprehensive, feeling and sensing the approach of the fatal demand against which they struggle in vain. They feel like running away from themselves and are thrown into a state of anxiety accompanied by a mixture of feelings and physical symptoms variously described as a sense of oppression, headache, and congestion in the head—blood rushing or mounting to the head; feeling of warmth or hotness; perspiration, diarrhea, intense and sharp pricking in the urethra and an urge to frequent urination; violent palpitation, flames appearing before the eyes, vertigo and a vague feeling of increasing sexual excitement, the tension of which, as it grows, assumes the character of an organic necessity that finally leads to the act of exhibitionism.

The symptoms above described, vary, of course, with each individual, but they appear to be essentially of the nature that are frequently observed in anxiety attacks. The symptoms subside only with the consummation of the act itself.

The Attack Proper.—With the oncoming of attack all ethical consideration, and possibility of criticism, all consciousness of danger and legal responsibility seem to disappear completely. Once exposed exhibitionists know nothing more of what happens. The patient is in a condition of day-dream and merely executes the scenes of those dreams. There is at the time of the act a state of imperfect consciousness and almost universally the exhibitionist will deny forethought and premeditation. They describe their condition as one in which consciousness is almost absent, their state as one of confusion, of foggiess with a feeling as if drunk or intoxicated; or they speak of being in a dream or in a trance-like and extremely happy state, being absolutely absorbed in their lust. Indeed, they do behave as if in a dream or sleep. At the height of their excitement some exhibitionists will walk or run about planlessly and aimlessly, exposing their genitals anywhere—the member wet and damp, usually, however, without there being an ejaculation; then breathe more easily after the act and speak of this as an avenue of escape from nervous irritation, as a means which affords them relief from nervous excitement.

Quite often the excitement and tension do not appear so marked or so evident and the act strikes one as being more deliberate and planned, although this does not change the essential nature of the reaction. Burgl (quoted from Wulffen, 21) and others describe what

may be regarded as a typical exhibitionistic act. The covered member is exposed at the approach of the women and girls. As a rule it is not erect. The exhibitionist then imitates urination and suddenly turns facing and staring at the feminine person. It is emphasized by exhibitionists that they must be seen, otherwise there is no pleasure. The act is not necessarily nor frequently accompanied by masturbation as the exhibitionist seems to find full satisfaction from the completed performance itself. The very disgust, fright or other intense emotional reaction aroused in the person toward whom the act is directed is often sufficient to intensify the fascination and produce in the exhibitionist a state of greatly heightened sexual excitement, which may constitute an end in itself or lead to the satisfactory performance of the sexual act. (This is even true in some instances of marital relations.)

Direct lascivious remarks are seldom made, although when uttered they clearly show that through his act the exhibitionist is striving to elicit in the victim a powerful sensation and is immensely interested in what people think of him afterward. One individual exhibiting himself in church said: "I always observe and watch the effects of my exhibition on the faces of the ladies. By the act I want to compel them to exclaim 'What a compulsion has nature created that one is permitted "it" to be seen in such a manner'." Another, a woman, unmasked herself in court before the judge, exclaiming: "Look, gentlemen, how beautiful I am." Still another said: "Wait, I will show you something beautiful, something you have not seen before in your life." Each and every exhibitionist wishes to be envied for the possession of his charming penis or other physical part with which he is in love. He craves to attain amazement and wonder. He thinks that by the exhibition of his genitals he is conferring a service and kindness—a silly, puerile, childish reaction.

Attacks at rape are seldom made, although some exhibitionists will "dare" their victims to imitate them, or touch their member, while others will beg to be pitied or be granted sexual intercourse, will attempt fellatio or ask to be masturbated, and if refused will masturbate; others again will say that sexual relations have no appeal for them or will admit they are impotent.

The act may take place anywhere—secretly at home, from or before the window, from the housetops or before passing trains, in court or in opera house, in the street or street car, school or park, near or within a public place; even in churches kneeling alongside

of women, the solemnity of the place preventing the women from screaming or running away. In larger cities there exist certain places particularly preferred by exhibitionists for their activities, as for instance, the zoölogical gardens and the center promenade of "Unter den Linden" in Berlin. To attract attention the exhibitionist often devises most ingenious means. He may merely expose himself before passing women, or may follow, jump and dance about them; or cough, call, whistle and ring the door-bell, deriving, apparently, all the satisfaction from having scared the people; knock at the window with his erect penis; throw coins, candy and fruit before children whom he not infrequently chooses as his victims. As a rule he does not desire inspection by the entire public but only by one or at most a few persons at a time. Characteristically, the victim must be a perfect stranger or the act lacks its entire significance for the exhibitionist. With each individual the act ensues with a photographic trueness as to similarities of position and circumstance, the starting and finishing points being, as it were, stereotyped; frequently the same street, the same house, the same woman, etc., although in acting thus the culprit runs added chances of being arrested.

Recovery.—On recovery the exhibitionists appear to be in a remarkably cloudy state and have but a dreamy and imperfect remembrance of what has occurred. They speak then of "returning to reality," or waking up. They feel weak, depressed and morose. The confusion may last for quite awhile. On regaining consciousness there is always a feeling of deep remorse and cutting humiliation and they regret and abhor the whole situation. Some will weep all night, begging for a remedy amidst sincere tears; others will pound their heads, firmly resolved never to do such a thing again; still others will attempt suicide. They loathe the urge against which they fight with everything in their power, yet in vain. They move heaven and earth to effect a genesis, entreating and beseeching for liberation from their terrible affliction which embitters their life and threatens them with destruction. The cry of despair and bitterness clearly indicates to us how truly sick the individual is and how heavily the patient suffers in consequence of his uncontrollable urge. To still the urge he is willing to make any sacrifice, even to the point of castration, although the therapeutic effect of this is very doubtful. Not infrequently one observes in some of these patients that soon after the acuteness of the situation has subsided, the remorse and shame are replaced and

followed by a certain characteristic optimism which enables them to ignore the past and gives them confidence that the act will never recur. Then too, while deploring the act and seeking aid with unquestionable sincerity, they are sometimes observed to have no sense of shame, degradation or humiliation, but, on the contrary, give the impression of glorying in their acts, of being glad that after all it happened as it did.

When asked to explain their actions, most of them are quite unable to advance any reason beyond stating that they followed a blind impulse which was so overwhelming as to be beyond control. Some will remark that exhibitionism to them is a complete equivalent of ordinary sexual enjoyment; others, that they exposed their genitals in the belief that this would produce in the victim sexual excitement or that she would respond by exposing her own genitals; others yet are satisfied by merely having their genitals looked at. But in any instance the act brings them great relief from the tremendous tension under which they have been working.

III. REVIEW OF THE LITERATURE *

IV. THE PSYCHIC MECHANISM OF EXHIBITIONISM

1. *General and Normal Phenomena in the Development of Exhibitionism*

We have discussed so far the clinical psychopathology of exhibitionism and it has become increasingly clear that we are dealing here with a particular type of abnormal psychic reaction that has all the earmarks of a neurosis and a mechanism that is characteristically regressive in nature. However, the factors encountered in the history of these neurotics do not appear on the surface to be in any wise essentially different from those which in a varying degree are universally present in all neurotics. Yet, not all neurotics become exhibitionists, indeed only a very small percentage of them ever display direct exhibitionistic tendencies. Why then exhibitionism? Where has the main stress been laid; or what, if anything, has been added or omitted? To understand this we must go back, first to the study of the psychic life of the normal child, of those conditions that lead to the development of the exhibitionistic impulse as a normal

* Owing to limitations of space, this chapter is omitted for the present. It will appear in full in the Monograph "The Sexual Offender."

reaction, and secondly to those of its abnormal deviations and aberrations that later on lay the foundation for pathologic exhibitionism. The former relate primarily to the development and the rôle of the partial sex impulses, erogenous zones, fore-pleasure and end-pleasure sex activities; the latter deal more particularly with those of the environmental conditions the stressing and the accentuation of which leads to the development of the compulsion of exhibitionism.

One of the most important infantile sex impulses is the impulse of looking. Von Hug-Hellmuth (6) states that what may be regarded as the first rudimentary tendency toward exhibitionism appears already in evidence at a period of infantile life when the eye can hardly be of any importance as an erogenous zone, and it therefore seems to be more in the nature of an instinctive reaction, more likely related originally to the agreeable skin sensation accompanying changes in temperature; although even here the sexual element becomes evident when one observes the nature of the parts of the body preferably chosen by the infant for exposure—the genitals, the nates, etc. Later, the pleasure as well as the interest manifested by the child in the nakedness of its own body lay the foundations for narcissism and express in an unmistakable manner the direction of infantile autoerotic tendencies.

Coincidentally, there may also be discovered the tendency to regard other persons as sexual objects, a tendency that expresses itself in the desire for looking and showing off. The latter appears the earlier at a time when the child is still shameless and finds distinct pleasure in displaying its body and especially its sexual organs; while the tendency for looking appears to be a later development when the sense of shame has already erected a definite barrier against it.

Freud, (5) in discussing the relation of the erogenous zones to sex activities, states that in the process of attainment of the sexual aim, as we see it expressed in the normal adult, there are set in motion certain preparatory activities which serve the function of supplying new excitement and added stimulus toward the next step until sufficient motor energy is produced to bring the sexual act to its conclusion.

These activities are accomplished through the excitation of the erogenous zones (lip-kissing, skin-touching, eye-looking, etc.), which in their totality coöperate as well as become subservient to the primacy of the genital zone until the final goal is reached. Because of the divergence in the development and the differences in the mechanism involved, the emotional accompaniment of these activities is spoken of as fore-pleasure in contradistinction to the end-pleasure accompanying the climax of the sexual act.

Tracing these further to their genesis, Freud finds that these prepara-

tory or fore-pleasure activities are in reality the same as those furnished by the infantile partial sex impulses, except that in the latter instance they manifest themselves independently; for in the earlier years the impulse emanating from the erogenous zones act singly, seeking pleasure as single sexual aims without drive toward the final goal that we find in the adult.

The road of the development of the normal sexual activity from the more primitive infantile modes of reaction to its final form of expression as we see it in the normal adult is a long one, and not always a smooth one, and situations are sometimes observed in which the attainment of the normal sexual aim appears to be interfered with. It thus happens sometimes that for one reason or another a particular erogenous zone contributes more than its usual or proportionate share of pleasure, and by the very excess of it so conditions the individual as to fixate his sexuality at the particular stage. The entire sexual development then becomes shortened as well as distorted, and the particular act in question, instead of aiding the attainment of the normal sexual aim, does, on the contrary, take its place, giving rise in later life to many neurotic symptoms.

The significance of the eye as an erogenous zone may readily be appreciated when it is realized that a certain amount of looking is as indispensable for the attainment of the normal sexual aim as is kissing, touching, and other preparatory activities. To attain this pleasure and to give full play to the optical impressions, the normal individual will seek to free the hidden parts of the body of its coverings. Reflected mentally as a thing of beauty, the entire body then, and not only one particular portion of it merely, becomes a source of libidinous excitement which aids considerably in the heightening and ultimate releasing of the sexual tension.

It is here, however, that marked digressions and deviations from the normal may occasionally be observed and "looking" becomes a perversion when it is regarded as a sexual aim in itself, thus suppressing or substituting the normal sexual act; when it is directed exclusively toward the genitals, or when it derives particular satisfaction from looking at excretory functions.

As a pathological manifestation the impulse for looking may express itself in two or rather three forms. One consists essentially in the erotic satisfaction which an individual derives from looking at his own body; this may be designated as narcissistic exhibitionism. (Some adult individuals undress and derive definite satisfaction from viewing and looking at their own genitals; the pleasure is often intensified by mirrored reflections.) The other requires for its attainment the presence of sexual object or objects and may appear in two quite distinct forms: (1) The active, the impulse for looking at another person's genitals (voyeurs), in

which the eye acts as an erogenous zone and the genitals of the sexual object as a sexual aim. The sexual object may be of the same or opposite sex. (2) The passive—exhibitionism proper—the impulse to be looked at by others, in which case one's own genitals behave both as an erogenous zone as well as a sexual aim, while the sexual object serves as a source of stimuli. Here, too, the sexual object may be the same or opposite sex. Both forms are usually present in the same individual, although one may be more emphasized and at the expense of the other.

Exhibitionism may, therefore, serve a number of purposes. As a regression to the infantile level, it may express the desire for the repetition of the pleasure which the child shows in displaying its own body, especially its sexual organs; it may also serve as an expression of auto-eroticism, fixation upon one's own genitals. It may be used as substitute for masturbation or to enhance masturbation fantasies, the presence of the sexual object acting as an excitant; it may also be used for the purpose of bringing into view the genitals of the sexual object. As a sadomasochistic expression it may be used to embarrass or to be oneself embarrassed by breaking the barrier of shame. It may be used as a compensation for the feeling of phallic inferiority to convince oneself and the sexual object of personal potency and virility. It may also be used as an expression of the castration complex, and lastly as a compensation for psychic impotence, an attenuated form of sex gratification.

2. *Constituent Factors in the Development of Pathologic Exhibitionism*

Having learned the basic factors which underlie the development of what may be called, the normal exhibitionistic impulse, although in themselves not leading to exhibitionism proper, let us now turn our attention to the analysis of the more specific conditions in the presence of which exhibitionism gains its fullest expression as a pathologic phenomenon.

Narcissism.—Stekel and Sadger (15-18, 13) to whom we owe most of our knowledge bearing on the psychopathology of exhibitionism, speak of the condition as being essentially a regressive phenomenon, a reaction of infantilism. We know that while the child is naturally constructed along narcissistic lines and narcissism may be regarded as a normal stage in the psychologic development of the individual that to a certain extent finds its way in a sublimated form even in normal adult life, it may sometimes become abnormally stressed and hypertrophied during childhood and the child will thus grow up with greatly exaggerated narcissistic tendencies.

There are many ways which lead the child to come to believe

in the charm and irresistibility of its own body; and foremost among these is the ignorance on the part of the well meaning but misguided parents in not knowing how to properly educate their children. It is not often realized how very susceptible and highly impressionable the child is, and how profoundly it is affected by the shower of undue attention and excess of praise that is being lavished and heaped on him by fond parents and relatives. Not infrequently the naked child is caressed, played with and fondled by the loving and enraptured mother, who devours this heavenly, this beautiful body with her kisses and caresses to the astonishment and delight of all present. It is just in such a manner that the strong psychic association between nudity and charm is formed in childhood.

Incestuous Fixation.—The constant and exaggerated cultivation of narcissistic tendencies by the mother (or her surrogate—an aunt, a sister as the case may be), with its unavoidable and often not unwitting stimulation of erogenous zones, is bound to have its effect on the eroticism of the child quite beyond its mere narcissistic expression. Although ordinarily the child is obliged to assume a passive rôle in these relations and thus be at best only passively exhibitionistic, the situation does not stop at that and leads to further inroads into his sexual personality. An individual who takes so much pains and shows the little boy so much affection is bound to become a source of libidinous interest to him and ultimately a love object; and so quite universally we find in the history of the exhibitionist that as a concomitant in the development of narcissistic tendencies there also develops in the little boy a strong psychosexual attachment to the mother.

Voyeur and Exhibitionistic Episodes.—The next factor that particularly tends to strengthen the situation is the frequently unwitting witnessing by the little boy of numerous bedroom scenes which tend to stimulate his voyeur tendencies and further serve to impress upon his mind the idea that in exhibitionism one has the best means of getting and holding the love of the woman. This, in turn, lays foundation for more active voyeur and exhibitionistic proclivities; heretofore passive, he is now deliberately seeking opportunities that will give an outlet for these desires.

The Oedipus Situation.—Out of this there follows quite logically the development of a typical Oedipus situation. The little boy feels that in the mother's affection he ought to take the place of the father—and in phantasy he does. There develops now in the silent

and passive participant alongside a mother attachment an equally jealous attitude toward his father; and in this jealousy the feeling of personal genital inferiority which one is likely to suffer when prevented from an open expression of his cravings, not infrequently plays a prominent rôle.

Related and Secondary Phenomena.—These are the general conditions commonly found in the psychogenesis of all types of exhibitionism. As a psychic phenomenon, exhibitionism may appear singly or it may be a part of a more general neurotic make-up where many other related phenomena are present. We have seen that exhibitionism often goes twin-like with voyeur activities; it is also frequently found to be associated with obscenity, frotteur activities, etc., and they all no doubt have similar psychic roots; which of these shall later gain the more predominant expression will depend essentially upon the particular and specific environmental conditions under which the exhibitionism of the individual in question has first developed. It is also further observed that attendant upon the expression of exhibitionism there are certain phenomena which although not universally or constantly, are nevertheless quite frequently present in some or other cases. It is known for instance that with some individuals the act consists in merely exposing the genitals, in others it is accompanied by urination, while in others yet the act goes with masturbation activities. These secondary phenomena, quite like in the case of the related phenomena, depend too for their appearance or absence on the particularity of the early setting of the individual cases.

Larval Exhibitionism.—Since the factors above mentioned are frequently observed as forming a part of other types of neuroses, it is clear that exhibitionistic tendencies will be found to be a component part of many other reactions. There it appears in larval form and gains only partial expression as an implicit or attenuated types of reaction that is lost in the mass of other symptomatology (psychic exhibitionism) and never given full or open discharge. Many persons masturbate nakedly before a mirror or just behold themselves in the mirror or inspect their penis in the looking glass rejoicing at the sight and thought that it is well developed, but their exhibitionism does not go farther than that.

Early Exhibitionistic Activities.—The above, in brief, is what lays the foundation for future voyeur and exhibitionistic activities and from then on we find the little boy seeking every opportunity for

their expression. The incestuous cravings back of it do not, of course (unless exceptionally) find an open expression, yet they operate as a driving force in molding the child's personality. Here from the start they have to contend with a variety of environmental influences which tend to check and repress sex expression in any form. This force of repression only serves to strengthen the craving; behind an obvious sense of shame there always lurks an unrequited urge to exhibit. With the background of Oedipus situation and its concomitant phenomena, the child is led into aberrant avenues of sex expression with exhibitionism as one of its adaptations. A part of the libidinous energy is often diverted into autoerotic channels, the practices being accompanied by exhibitionistic phantasies in which he and the mother are participants. Occasionally one meets with situations where incest fixations are allowed active expression as when the mother quite wittingly takes in the boy as a participant in sexual relations. Such a situation is fraught with still greater dangers for it leads to the direct suppression of heterosexual promptings and the digression of the libido into homosexual channels.

In many instances, however, the child, prevented from exhibiting himself before his mother or seeing herself exhibiting to him, will seek the same in a substituted form which to him would be the nearest approach to the original situation. In the earlier years he finds the opportunity most easily before children. It is frequently mentioned in the instance of exhibitionists that there is always found in them a history of exhibitionistic episodes attended by marked display of affect; it would, however, be more correct and nearer the truth, to say that as a child he deliberately sought these episodes by reason of earlier fixations which also explain why they were accompanied by such display of affect.

Adult Exhibitionism.—Although the early exhibitionistic episodes in turn undergo repression, the psychogenic forces back of them are still active in the unconscious and the individual who has been constantly subjected to their pressure will often find himself on reaching adolescence quite inadequate to the demands of normal sex life. Such inadequacy may range and vary from an apparently normal sex life with only a few, if any, obvious neurotic manifestations, to a sex life that is mechanical in nature and appears without pleasure or is wholly precluded by reason of relative or total impotence. An explosive eruption of exhibitionism is then imminent and usually appears to be precipitated by an acute emotional situation. It is

psychogenically significant that quite a number of them break out following mother's death; an unsuccessful love affair is another frequent precipitating factor. As life now cannot supply what he craves, the individual's repressions and inhibitions will begin to give way and the infantile personality will step to the front. He will fall back on his childhood and look for a substituted form of expression. He attempts then through the exhibition of his penis (which to him is the most valuable thing he has) to captivate and arrest the woman's attention, just as his father—to his mind—held through exhibitionism the love of his mother; and just as to him, as a child, the exhibitionism he witnessed between his parents was equivalent to the full act, so to him, as an adult, but psychosexually still an infant, the act of exhibitionism takes the place of the complete sexual act. Of course, there are numerous other factors that account for the preferential exhibition of the genitals. The overestimation of his body, as a part of his narcissitic expression, leads him to think of the genitals as the main portion of the body, partly because it is these parts that were so frequently stimulated and partly because, in the witnessing of many bedroom scenes these appeared to him as playing the chief rôle; again, as a child in the unconscious search for the origin of the child, he concentrated his attention on the genitals of adults.

Exhibitionism—a Regression.—In exhibitionism we find a most striking demonstration of the tremendous power which infantile fantasies exert over the adult. How truly does the human heart constantly crave and long for the return of its first loves! With the libido thus fixated on early childhood scenes, there is a constant seeking of the repetition of the previous impressions; the urge seems to order their entire being. The subsequent exhibitionistic episodes appear, then, to be conditioned in a large measure on these earlier experiences when later the setting is one which psychologically resembles or reproduces the original background. Exhibitionism, then, appears merely as a repetition of certain acts and scenes of bygone days of childhood. The neurotic does not see the boundaries between reality and fantasy. Not unlike the epileptic who forsakes reality completely to live a fantasy scene while still in reality so does the exhibitionist temporarily forsake reality; it is in every sense of the word, a hallucination in waking state that dramatizes early infantile experiences. Only through the medium of complete psychic regression can the exhibitionists once more become youthful. What they need is the original image which they always seek in the other girl.

During the attack the patients are children, dreaming a daydream while awake, reënacting before themselves the acts of unforgettable and beautiful childhood. Intellectually endowed and highly ethical as the individual may be during lucid periods, during the act he possesses the ethics and intellect of a child and judges the entire world with the standards of childhood. By throwing the individual back to a primitive age and era, exhibitionism reveals itself clearly as a regressive reaction, an expression of infantilism and atavism.

Viewed then in the light of the basic factors which make up its essential features, exhibitionism can hardly be regarded as anything less than a regression into the period of infantility. Back of it, and indeed its very root, is self-love, and a supreme belief in the beauties and charms of one's body. As he believes in the almightiness of his thoughts, so does the neurotic also believe in the almightiness of his body and its charms. And while it is true that not infrequently we find in them marked feelings of inferiority as regards one or another part or organ of their body, there is also a concomitant compensation for this and they will frequently overestimate or exaggerate some other part or organ of the body. It is obviously also the same regressive nature of the phenomenon that will explain why it is so frequently enacted in the presence of children, why they as individuals unmask while urinating, because when children this act gave them most frequently the opportunity to unmask the genitals; and it also explains why exhibitionistic acts so rarely lead to aggression because the underlying psychology of exhibitionism is that of passivity, of only seeing and being seen. The strongest demonstration encountered as a concomitant of exhibitionism is a vehement act of masturbation which, too, speaks for its infantile character. An aggressiveness greater than that clearly belongs to another pathology.

To sum up, now, the essential features of the disease of exhibitionism, we may say that one of its main psychic determinants is the constant struggle that is going on in the individual between his instinctive cravings on the one hand and the strong moral censorship on the other. These instinctive cravings are, in the main, strong narcissistic tendencies, incest fixations and exhibitionistic episodes. Because they were all originally attended by strong display of affect, they have remained behind as a powerful driving force and the individual experiences a constant urge and seeking after repetition of the past events, the pleasure-bearing memories of golden childhood.

This, however, he can not attain directly, as, because of moral prohibitions, it has become unacceptable to the consciousness. Unable to find a direct motor discharge, the affect becomes liberated from the prohibited activity and is then transferred and attached to another one apparently less painful and more acceptable to the moral "I." The individual commits a lesser crime to escape committing a greater crime. The patient, of course, does not even suspect or realize the significance of the activity and its relationship to the underlying psychic mechanisms. Because it symbolically represents an unconscious activity and as it is only a substitute, it is quite unable to effect a complete gratification of the urge which is thus never stilled or discharged, constantly seeking repetition, finally assuming the character of a compulsion. Exhibitionism is a compulsion, the exhibitionistic acts being attempts to re-live, in changed form, some cherished activities of the past; they are substitutes for repressed but craved manipulations.

V. THE LEGAL ASPECTS OF EXHIBITIONISM

Much ink will yet be spattered and time and effort used and lost before the differences between medical and legal conceptions of crime will be cleared up. The differences no doubt lie largely in the points of view followed. The main function of the law being protection of society from various anti-social influences with which it has to contend, its point of view is entirely social and collective and not individual; hence of necessity it must often encroach upon the rights of the individual, frequently sacrificing him for what appears to be the larger good of society. By reason of the same efforts to protect society at all costs, the law is guided primarily by established precedent, by the hard and painful lessons learned from the past and will not take risks for the future. Medicine, on the other hand, by the very nature of its practice must constantly disregard the old traditions and precepts in order to pave the way for more progressive conceptions to fit the growing body of knowledge; in its search for new and more advanced methods, it must reach out into the future, speculating and reflecting on new possibilities, until the proposed theories tested and retested have found their confirmation in actual and proven facts. The history of medicine is replete with bold and fruitful conceptions that have lifted mankind from its savage state and given it a new vision of physical and mental health. And it is also by the very nature of its practice which is so distinctively individual

and personal that the individual and personal element has been so stressed and emphasized in medicine, that in order to save or protect the individual it was frequently obliged to minimize if not disregard, the social aspects of the case.

However, such differences as exist between law and medicine are not nearly as irreconcilable as they at first appear to be and gradually the chasm is being bridged by more liberal and tolerant, even humane points of view. The aim of all being a harmonious adjustment of the relations between the individual and society, it would hardly be wise to emphasize differences where coöperation might exist.

Of all types of antisocial reactions, none meets with such vehemence and terrific odium as those that violate accepted standards of morality. This, no doubt, because sex life being looked upon by society as the means of perpetuating itself, any deviation from socially sanctioned sexual norms is met with greatest resistance and opposition, expressed not only by punishment through laws, but also by the many insidious and subtle ways through which society stigmatizes individuals that do not conform to its standards. In the case of the species vs. the individual, or morality vs. sensuality the former has always been given preference if not primacy; biologically, the herd must be protected even if the individual is to perish. The contest, as once pointed out by Krafft-Ebing, is unequal; and in spite of the many heavy barriers placed by society the expression of so powerful and natural instinct has been but little influenced by either punishment or stigmatization; first because only a small number of sexual crimes can be legally combated and secondly because only a limited number of crimes ever reach the authorities. It is quite universally recognized in law that "immorality" and "crime" are by no means convertible terms (Clark and Marshall); and only that immorality is punishable which is public, because of its presumed tendency to corrupt the public morals.

It was psychopathology that first brought to the attention of the legal procession the pathologic significance of many sexual crimes and is now saving law from the danger of passing judgment on individuals who in the light of science are not responsible for their acts. Unlike law it emphasizes not the crime committed, but the criminal who committed the crime; accordingly, the manner of treatment is different and where it recognizes that the man is not responsible for his actions it pleads that he be not given definite punishment, only to be let out again on expiration of the sentence as a danger to the

community, but that he be removed from society for life—not however as a punishment, which is hate, but as a protection for both the individual and society. It was not so long ago that it was quite the order of the day to hang an insane individual because of a crime committed; now we place him in a hospital and give him at least custodial care; thus protecting the society from anti-social conduct, while at the same time giving the individual the benefit of more humane treatment. This is because in the instance of the insane we recognize quite clearly that the crime committed was not wilfully intended but was the result of an aberrant mind. Hardly a jury can be found now that will pass judgment and sentence upon an unmistakably insane individual.

On the other hand, while law is ready to recognize the lack of criminal intent and factor of irresponsibility in the instance of the grosser and more obvious forms of mental disease, much enlightenment is yet to be done by psychopathology as regards the still more numerous instances of mental and psychic states, which, although not obviously pathologic have, nevertheless, at their basis most profound pathology. We refer here to those rather widely diffused sexual anomalies which are more than minor biological deviations from the normal and the average because they are rooted in deeply buried psychic conflicts. These are secretly indulged in by many individuals who because of rigid prohibitions against them, occasionally come in conflict with law. The antisocial activity may manifest itself directly in the performance of the perversions or it may manifest itself vicariously, as in the case of indecent exposure, rape, murder, etc. We often fail to realize that a crime and offense, on the surface not sexual, may be traced to underlying basic conflicts essentially sexual in nature.

The recognition of these subtle and insidious psychosexual states as primary contributory causes of abnormal social reactions, is one of the most valuable contributions of psychopathology to criminology. The practical working out of this conception is still in its infancy and much missionary work is yet to be done not only among the legal profession, but even among psychiatrists. For it is still the belief not uncommonly entertained by psychiatrists that a man may be normal and in other respects perfectly healthy and yet be subject under certain conditions to gross sexual anomalies that bring him in conflict with the law. Even so careful a student as Bloch (2) holds the view that sexual perversities are widely diffused among

persons who are mentally and physically healthy and that in the majority of cases, sexual perversities are not indicative of pathology; adding that he is personally acquainted with a number of persons whose bodily and mental health is excellent, the finest specimens of primeval racial force, but who have assured him that they suffer from the most severe sexual perversions. In further support of this view, he quotes J. Salgo who too believes that in the absence of indubitable or demonstrable symptoms of physical disturbance and clearly recognizable abnormalities, aberrations of sexual activity can not be considered morbid.

But who knows the inner depths, the intimate and sacred details of the life of these individuals "whose bodily and mental health is excellent, but suffer from most severe perversions"? Who has ever searched and explored the many facets of their soul, the deep recesses in the sancta sanctorum of these neurotics, the terrific conflicts that rage within their bosoms beneath the apparent calm of the surface. The older descriptive writers, as Krafft-Ebing, Bloch and others have dealt with extensive material broadly, but not deeply. By their painstaking accumulation of facts, they have rendered immensely valuable service and in focussing our attention on the psychopathologic phenomena, paved the way for further researches. But psychopathology in its constant search for the underlying mechanisms, could not rest content with the accumulation of facts, however well and minutely described. In the light of more recent analytic studies, it is becoming increasingly clear that in the majority if not in all instances, of sexual anomalies, we are dealing with severe forms of neuroses, and the reason why the individuals in question often appear physically and mentally healthy is because these aberrations are due primarily and basically to psychic conditions, the physical and mental manifestations being but secondary reactions, which need not necessarily be present, although when present point unmistakably to the existence of a basic psychic pathology.

We must, therefore, dismiss as scientifically untenable the view that because an individual is able to function well intellectually, that this *eo ipse* precludes the possibility of the existence of any disturbance at the emotional and psychic level; it does not. Indeed, it is a well known fact that the intellectual productivity of many neurotics is considerably above the average. Nor can we longer adhere to the view that an individual, subject to abnormal episodes at some periods, but apparently normal at other periods, is a normal individual and

therefore must be held partly or even fully responsible for any anti-social act committed during the episode; he is not. The periodical recurrence of what appears to be an impulsive act under identical circumstances and in a stereotyped manner raises the original presumption of some marked underlying pathology present to the level of an undoubted fact. For a careful analysis will invariably show that the particular episode or act in question is but one of the manifestations, a part of a general psychopathologic syndrome.

We have already learned that in the instance of the exhibitionist we are dealing with an individual who carries a heavy emotional load and who because of this can never make an adequate adjustment to reality. In his exhibitionistic attacks, committed under the coercion of a most powerful drive, we recognize exceptional episodic psychic states during which he is practically robbed of consciousness regressing to lower infantile levels. But once an exhibitionist, always an exhibitionist, whether such exhibitionism is given direct expression in an outward behavior or is masked behind other pathologic manifestations. For even during the lucid intervals when the man is apparently his normal self again, the exhibitionist is not free from those regressive fantasies which form so characteristic and prominent a part of the disease picture of exhibitionism. They have a cumulative action, constantly gaining in momentum until they find their motor discharge in the attack; here the exhibitionist is not unlike the epileptic who during the interparoxysmal period, is merely preparing for another episode which reaches its climax in the epileptic attack.

Search, therefore, as we may, we cannot find behind the exhibitionistic act either conscious criminal intent or wilful and premeditated motive, conditions which at once preclude legal responsibility since in law there must always be established the presence of a conscious motive either admitted or presumed from the commission of the act.

The conception, commonly accepted by the legal profession and psychiatry that between complete responsibility of people in perfect mental health and complete irresponsibility because of mental disease, there are numerous borderland cases with diminished responsibility, can not apply here. For in the instance of such episodic states as we witness in exhibitionism, we are obviously dealing with a temporary loss of any normal mental function and there can therefore be no question of any responsibility whatever. It also is quite obvious from the nature of the reaction, that no punishment, how-

ever severe or frequently repeated, will rid the individual of the regressive burdens responsible for the act, or even prevent the repetition of it when the tension again becomes high enough. It should also be equally clear that the only hope of cure lies in a thorough analysis of the psychic mechanisms underlying the compulsion. Psychopathology must aim at a deeper extension of its influence in matters of law and complete justice will never be done to the criminal until and when judge and jury accept the medical point of view and see in him a particular type of sick personality who must be treated and not punished. It is through the physician who is to be the judge of the future that the medical profession will carry on its message and duty of healing these people whose soul is so sick and in so doing restore them to usefulness to themselves and others.

VI. SUMMARY

1. Exhibitionism is a widespread psychic reaction that reveals itself as the pleasure an individual has in displaying himself in an exposed, nude form. As a normal phenomenon, it is expressed in much of the acceptable social behavior, but as a pathologic phenomenon it is distinctly an expression of a psychic disease that has all the characteristics of a severe compulsion neurosis.

2. Nudity is a natural normal state among primitives but becomes repressed and forbidden when clothing, and with it, the sense of shame, makes its appearance as a later development among civilized nations.

3. The exhibitionist as an individual may be described clinically as suffering from a neurosis with the usual concomitants of the condition. The family history is not infrequently tainted, while the personal history shows that the man is heavily burdened, particularly on the emotional side. These burdens are expressed in many psychoneurotic features, abnormal psychosexual life, regressive fixations, and many other neurotic reactions.

4. While the onset of the disease is ordinarily attributed to a variety of factors, a more careful study reveals that these are only superficial and that the true causes lie deeply buried in the early life of the individual.

5. The exhibitionistic act appears in the individual exhibitionist as an impulsive and unconquerable reaction with the prodromal symptoms not unlike those observed in severe anxiety attacks, and the act itself resembling an acute hallucinatory-like dream state. During this

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waking dream state the individual is completely out of touch with the present environment and reality, but is regressing, re-living in fantasy earlier childhood scenes. His victims are usually women and children and the attack may take place anywhere, irrespective of the setting; the parts exposed are most often the genitals. To be noted here is that the parts exposed are those which the individual regards as particularly significant erogenous zones, which he seeks to see in others as well as wishes others to see in him.

6. The act, being psychically a complete equivalent of a psycho-sexual activity, it is not universally accompanied by erection, orgasm, masturbation, or other forms of sexual activity.

7. The recovery is often followed by a state of confusion and is accompanied by depression, deep feeling of remorse, and a determination never to repeat the act. However, all these resolutions, unquestionably sincere, invariably fail in their effect, which shows how truly sick these individuals are and how heavily they suffer in consequence of the uncontrollable urge, which, as they often spontaneously remark, overtakes them with such overwhelming force as to be beyond their control.

8. The foundation for exhibitionism is laid in the early activities of normal childhood. The activities have to do primarily with the development and rôle of the infantile partial sex impulses, erogenous zones, fore-pleasure, and end-pleasure activities. Among the infantile partial sex impulses are the impulses for looking and showing off with eye as an erogenous zone and some parts of the body, usually the genitals, as a genital zone. In adult life the infantile partial sex impulses normally become a part of the fore-pleasure activities, but some individuals may become so fixated at one of these stages that the fore-pleasure activity takes the place of and becomes in itself an end-pleasure activity.

9. The looking and showing off impulses may thus become perverted and express themselves in voyeur and exhibitionistic activities. The particular circumstances which appear to condition this type of infantile behavior are to be found in the early environmental influences. There is to begin with the parental, most often maternal, influence in cultivating and unduly exaggerating the narcissistic tendencies of the child, and this quite inevitably is followed by the development of a strong mother attachment. The witnessing of numerous bedroom scenes further stimulates the child's voyeur and exhibitionistic tendencies and lead to the feeling and phantasy that in mother's

affections he might and should take the place of the father; and this quite logically is followed by the development of a typical Oedipus situation and its concomitant phenomena.

10. Obligated to repress the incestuous cravings, the child's surging sexuality is led into aberrant avenues of expression with exhibitionism as one of its adaptations. A part of the libidinous energy is often diverted into autoerotic channels, the practices being accompanied by exhibitionistic phantasies in which he and the mother are participants. But in any instance the child, seeking yet unable to exhibit himself before his mother or seeing herself exhibiting to him, will seek the same in a substituted form that would be nearest possible approach to the original situation; the opportunity for this he finds most easily before children.

11. The continuous operation of abnormal sex drives leads to the development of a sexual inadequacy, and when such individual reaches adolescence he finds himself quite unable to meet adequately the demands of normal sex life. He will then attempt to fall back on his childhood and look for a substituted form of expression. An eruption of exhibitionism is then imminent, and it often requires but a relatively minor emotional situation to precipitate it in an acute and not infrequently even violent form. Such exhibitionistic attacks are essentially regressive in every sense of the word; it is a symbolic seeking of repetition of particular, vividly remembered acts and scenes of by-gone days of childhood. The victim usually symbolizes the patient's mother (or her surrogate); again, the exhibitionist, especially if the victim is a child, may by a process of identification and differentiation identify himself on one hand with the victim and on the other hand with his mother.

12. Exhibitionism is a major perversion and takes the place of an end-pleasure activity. It is a substitute for forbidden incestuous cravings, and because as a substitute it cannot fully effect complete release or gratification, the urge is never stilled, and finally assumes the character of a compulsion neurosis.

CONCLUSION

A psychopathologic study shows exhibitionism to be a compulsion neurosis and, as an expression of unconscious urges, essentially regressive in nature. The exhibitionist, as thus seen, is a very sick individual whom it is useless to punish legally but who instead must be treated psychotherapeutically.

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SPECIAL REVIEW

PHYSIQUE AND CHARACTER¹

By WILLIAM A. WHITE

The attempt to classify men into types has always lured the thinker from the earliest times and has been frequently attempted from various points of view. Hippocrates made the attempt to account for health and disease on the basis of his humoral doctrine and now Kretschmer attempts to correlate certain temperaments with certain bodily configurations.

To understand the contribution of Kretschmer one must bear in mind the major accomplishment of Kraepelin in the field of psychiatry. The service which he rendered by the separation of the two great groups of psychoses, the manic-depressive and the schizophrenic, based upon their course and outcome, is too well known to require comment. It is upon the basis of these two great groups that Kretschmer's work, in the first instance, takes its origin. The first problem he set himself was to see if there was any correlation between these two fundamental psychoses and the physical make-up as it could be observed and measured from the surface. In other words, whether the manic-depressives (circulars or cycloids) and the dementia precoxes (schizophrenes or schizoids) exhibited each or both a characteristic bodily make-up. For this purpose he investigated in his first series 85 circulars and 175 schizophrenes to which were later added over 100 further cases, bringing the total number investigated to 400 cases.

The details included in the main the face and skull; the general physique including musculature, fat distribution, proportions of limbs and extremities, chest, stomach, shoulders, pelvis; the surface of the body including pigment, hair; the glands; the measurements of the height, chest, shoulders, limbs, and skull; and certain temporal considerations such as age, onset of psychosis and physical illness.

From a consideration of these details three types emerged as follows:

¹ Kretschmer, E.: *Physique and Character. An Investigation of the Nature of Constitution and of the Theory of Temperament.* Pp. 262 + index. Price \$5.00. Pub. by Harcourt, Brace and Company, New York, 1925.

1. *Asthenic type*. Characterized by a deficiency in thickness but with undiminished length of all parts of the body—face, neck, trunk, extremities, and in all the tissues—skin, fat, muscle, bone, and vascular system. The picture here is of “a lean narrowly-built man, who looks taller than he is, with a skin poor in secretion and blood, with narrow shoulders, from which hang lean arms with thin muscles, and delicately boned hands; a long, narrow, flat chest, on which we can count the ribs, with a sharp rib-angle. A thin stomach, devoid of fat, and lower limbs which are just like the upper ones in character. * * *

“A variant of this type has wide shoulders, but with a plank-like, flat chest, and very sharp outstanding shoulder bones. Instead of the thin stomach, in some cases we find a loose, small, enteroptotic pendulant stomach, or a disposition of fat in eunochoid or feminine form. * * * Often we find a variety of the asthenic type distinguished by stronger or weaker manifestation of symptoms of the dysgenital group—of infantilism (akromicria), of femininism (waist, enlarged buttock-circumference, enlarged hip measurements, feminine arrangement of puberty hair), and particularly a streak of eunochoidism with abnormal height and abnormal length of extremities. * * *

“A favorite form of variation is a mixture between asthenic and athletic types. * * * (*e.g.*, long, narrow chests, with coarse extremities, an incongruity between face and physique, etc.), or else a middle-type of slim muscular figure, which, again, may tend more towards the gracile thin side, or more towards the strong muscular side.”

The asthenic face presents an angular profile, long nose, and is of a shortened egg form. “The skin and soft parts are thin, pale, poor in fat; on the bridge of the nose particularly, the skin is stretched thin and smooth over the sharply outstanding bone. The bone formation is throughout delicate; where, as is the case with the malar bone and the supra-orbital arch the conformation is well marked, this is not due to strong bony growth but to the transparency and thinness of the soft covering flesh. The circumference of the skull is small, measuring 55.3 cms.—by far the lowest measurement of the three types of head. The asthenic skull is, compared with the other types, on an average short, low, and of a middling breadth. In the figures representing the measurements one is surprised by the smallness of the sagittal diameter (18.0), while in width (15.6) it is larger than the skull of the athletic type. We find that the shape of the back of the head is usually steep, with but little roundness. On this account

and because of the shortened sagittal diameter, we often find among asthenics also the visual appearance of the 'high-head,' without its being necessary on this account from the absolute measurement of the height to the width. In the face the general principle of growth of the asthenic men is repeated, so that the upward growth is undisturbed while the sideways growth lags behind. * * *

"When you examine the asthenic face it looks long and narrow, shallow, and thin, and, in addition, sharply moulded. On account of its narrowness it often appears longer than it is."

A marked disproportion of the asthenic face is that between the length of the nose and the hypoplastic under-jaw which produces the angular profile especially when the forehead is rather sloping, the upper half of the facial contour runs straight forward along the ridge of the nose to its tip and from the tip of the nose straight back to the small chin.

Looking at the asthenic face from the front; "in the purest cases, it manifests a shortened egg-shape in the lines of its circumference, while the contour of the lower jaw runs downward from the ears to the tip of the chin unexpectedly quickly and sharply. * * * Only a few of the asthenics show the classical angle-profile, for it is not by all of them that the hypoplasia of the jaw in the sagittal axis shows itself so strongly, and leads on to the distinctive backward-springing of the chin in the profile. The nose, too, does not always spring so strongly forward, often it is only long, thin, and with the tip drawn downwards. In all these cases we have a simple long-nosed profile."

2. *Athletic type.*

"The male athletic type is recognized by the strong development of the skeleton, the musculature and also the skin.

"A rough impression of the best example of this species is as follows:

"A middle-sized to tall man, with particularly wide projecting shoulders, a superb chest, a firm stomach, and a trunk which tapers in its lower region, so that the pelvis, and the magnificent legs, sometimes seem almost graceful compared with the size of the upper limbs and particularly the hypertrophied shoulders.

"The solid long head is carried upright on a free neck, so that the sloping linear contour of the firm trapezius looked at from in front, gives that part of the shoulder which is nearest the neck, its peculiar shape.

"The outlines and shadings of the body are determined by the swelling of the muscles of the good or hypertrophied musculature

which stands out plastically as muscle-relief. The bone-relief is specially prominent in the shape of the face. The coarse boning throughout is to be seen particularly in the collar-bones, the hand and foot joints, and the hands. Next to the shoulders the trophic accent often lies on the extremities, which in some cases are reminiscent of acromegaly."

The athletic type of face is steep egg-shaped. * * * "It also, just as the physique, is primarily characterized throughout by the pronounced trophism of the bones and skin (the muscles play but a small part here); the skin is thick, firm, generally fresh and of a good turgor, sometimes unclean, with a tendency to pimples, and often pasty and somewhat puffy. The color is generally pale. The bony relief has in many cases a plastic appearance, which can be easily observed on account of the pad-like shading of the bony supra-orbital arch, and the compact formation of the malar bone and the prominent under jaw.

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"The circumference of the skull is of a medium size. The shape of the skull is on the average high, narrow, and of a fair medium length. The shape of the back of the head varies, sometimes it is strikingly steep, sometimes projecting. A tendency to tower-skull is every now and then observed.

"The shape of the athletic profile offers but little which is characteristic. The prevailing type is heavily boned, snubbed-nosed, with projecting, well-moulded chin, and a gently curving profile line.

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"The athletic faces are often very long, the mid-facial length can attain an astonishing measurement (up to 9 cm.). The chin also is on the average long, in some cases it is moulded into a cone shape."

3. *Pyknic type*. "The pyknic type, in the height of its perfection in middle-age, is characterized by the pronounced peripheral development of the body cavities (head, breast, and stomach), and a tendency to a distribution of fat about the trunk, with a more graceful construction of the motor apparatus (shoulders and extremities).

"The rough impression in well-developed cases is very distinctive: middle height, rounded figure, a soft broad face on a short massive neck, sitting between the shoulders; the magnificent fat paunch protrudes from the deep vaulted chest which broadens out towards the lower part of the body.

"If we look at the limbs, we find them soft, rounded, and displaying little muscle-relief, or bone-relief, often quite delicate, the

hands soft, rather short and wide. The joints of the hands in particular and the clavicle are often slim and almost elegantly formed. The shoulders are not broad and projecting as with the athletes, but (especially among older people) are rounded, rather high, and pushed forward together, and they are often set down against the breast with a characteristically sharp depression on the inner deltoid curve. It seems then as if the whole mass of the shoulders were slipping downwards and inwards over the swelling chest; and the head also plays a part in this static displacement; it sinks forward between the shoulders, so that the short thick neck seems almost to disappear, and the upper portion of the spinal column takes on a slight kyphotic bend. In profile the neck no longer seems, as is the case with the other types, a slim round column, which carries the chin like a sharply cut-off, widely projecting capital, but in well-developed cases of middle-age and over, the point of the chin is directly joined with the upper forehead without any definite bends by a sloping line.

"The breast-shoulder-neck proportion is, apart from the shape of the head and face, and the manner of the disposition of the fat, the most characteristic mark of the pyknic character.

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"The pyknics tend emphatically to a covering of fat. And besides this the manner in which the fat is disposed is characteristic.

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The obesity of the pyknic is restricted for the most part within *moderate* limits, and is primarily an obesity of the trunk, the fat deposit in the case of the male results usually in a compact fat belly. * * * The pyknic face is of smooth five-cornered type.

"A typical pyknic face is the true mirror of the pyknic physique. It has a tendency to breadth, softness, and rotundity. The large skull, therefore, is round, broad, and deep, but not very high. The skin of the face is stretched softly on the unprojecting bony structure, letting the blood-vessels of the skin show through, the cheeks and nose having a tendency to redness. On account of the fullness of the individual parts the skeleton tends to breadth and flatness, and is not very prominent. The overlay of fat is rich; it is mainly concentrated, especially among old people, on the lower lateral parts of the cheeks, in front of the angle of the jaw, and in the region below the chin. * * *

"The profile of the pyknic is, as a rule, but gently curved, not particularly high, clear, and complete in the particulars of the nasal and lip contours, and yet not sharp and projecting. The mutual

relations in length of the forehead and mid-face, nose, and chin, are, in general, very harmonious, and their proportions can often be used as an index for the average.

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"The front-view circumference of the pyknic face varies in the typical cases about the characteristic flat five-cornered shape. * * * We see far more usually simple, soft, broad, round faces, which are, as far as anatomical structure and proportion go, fundamentally analogous to the pentagonal type, without attaining its morphological obviousness."

In addition to these three types he describes certain irregular, dysplastic forms, many approaching in make-up the types of glandular imbalances, particularly the dysgenital group.

The distribution of these types among the 260 cases first examined was as follows:

	Circular	Schizophrene
Asthenic	4	81
Athletic	3	31
Asthenic-Athletic mixed.....	2	11
Pyknic	58	2
Pyknic mixture.....	14	3
Dysplastic	34
Deformed and uncataloguable forms.....	4	13
	<hr/> 85	<hr/> 175

The table speaks for itself. The correlation is striking.

The author then proceeds to a detailed description of the cycloid and the schizoid temperaments. This is decidedly the best description the reviewer is familiar with. Numerous illustrative type cases are briefly described to show how these temperaments work out in actual individuals. Following this is a chapter on average men: cyclothymes and schizothymes, as he now calls them, also with illustrative case material. Finally he attempts the analysis and classification of a group of geniuses and closes with a chapter on the theory of temperaments.

The classification into cyclothymes and schizothymes presents a close similarity to many other attempts at classification which have been made and corresponds with the direction of the flow of libido in the psychoanalytic sense. The classifications I have in mind are

Ostwald's romanticists and classicists; Nietzsche's dionysians and appollonians; William James' tough-minded and tender-minded; William Blake's prolific and devouring; Otto Gross' inferiority with shallow consciousness and inferiority with contracted consciousness; Jung's extraverted and introverted; and Bleuler's syntonics and schizoids.

Kretschmer not only attempts to show specifically that the psychotic presents in exaggerated form, as does the genius only what the normal man also possesses but his particular contribution is the correlation of these personality types with the body form and make-up. The relation of all these elements in the two main temperament types is well set forth in the following table. It might be well to preface this table by a statement that he includes in the *diathetic proportions* the following characteristics of temperament:

1. Sociable, good-natured, friendly, genial;
2. Cheerful, humorous, jolly, hasty;
3. Quiet, calm, easily depressed, soft-hearted;

and in the *psychesthetic proportions* the following peculiarities of character:

1. Unsociable, quiet, reserved, serious (humorless), eccentric;
2. Timid, shy, with fine feelings, sensitive, nervous, excitable, fond of nature and books;
3. Pliable, kindly, honest, indifferent, dull-witted, silent.

	<i>Cyclothymes</i>	<i>Schizothymes</i>
Psychesthesia and mood	Diathetic proportion: between raised (gay) and depressed (sad)	Psychesthetic proportion: between hyperesthetic (sensitive) and anesthetic (cold)
Psychic tempo	Wavy temperamental curve: between mobile and comfortable	Jerky temperamental curve: between unstable and tenacious alternation mode of thought and feeling
Psychomotility	Adequate to stimulus, rounded, natural, smooth	Often inadequate to stimulus: restrained, lamed, inhibited, stiff, etc.
Physical affinities	Pyknic	Asthenic, athletic, dysplastic, and their mixtures

The following table gives a classification of the special dispositions found as distributed between the two great types:

	<i>Cyclothymes</i>	<i>Schizothymes</i>
Poets	Realists Humorists	Pathetics Romantics Formalists
Experimenters	Observers Describers Empiricists	Exact logicians Systematists Metaphysicians
Leaders	Tough whole-hoggers Jolly organizers Understanding conciliators	Pure idealists Despots and fanatics Cold calculators

The book is a serious and a brilliant attempt to hitch up the physical and the psychic from the point of view of the basic necessity that they be interrelated intimately. It is essentially descriptive. If its conclusions are borne out it will remain to follow description with interpretation. This will be a fascinating problem for the future.

ABSTRACTS

British Journal of Psychology—Medical Section¹

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ABSTRACTED BY SMITH ELY JELLIFFE, M.D.

1. JANET, PIERRE. Psychological Tension, Its Degrees and Oscillations. 1-16.
2. BROWN, WM. Symposium. Revival of Emotional Memories and Its Therapeutic Value.
3. LONG, CONSTANCE. Psychological Adaptation.
4. JONES, E. Recent Advances in Psychoanalysis.
5. READ, C. S. Pathogenesis of Epilepsy.
6. Reviews; Abstracts; Proceedings of British Psychological Society.

1. JANET, P. *Psychological Tension*.—Janet here repeats with but little change his 1915 viewpoints about psychological tension in the first of three lectures given before the University of London. With his usual facile grace of presentation he speaks of the need of an objective psychology—psychobiology as Adolf Meyer has long termed it. Psychological tension is an abstraction for Janet. It is a force that makes people do things. There is no analytical material in this very diffuse and very general paper.

2. BROWN, W., MYERS, C., McDOUGALL, W.; *Symposium on Revival of Emotional Memories in Therapy*.—This discussion, before the British Psychological Association of 1920, seems to have been stimulated because of the psychoanalytic insistence on the significance of repression, which the analytical school is aware had an excellent general expression by Aristotle when he discussed emotional catharsis through the drama—Tragedy, Comedy.

The shell shocked soldiers forced physicians to come out of their farcical mediaeval and archaic humoralistic ideas of pathology, and did really wake up—partly at least—many English doctors. This discussion of Freud's earlier term (abreaction) for older conceptions rarely gets to

¹ This journal, heretofore an appendage of the British Journal of Psychology, came into separate definite form October 20, 1920, under the Editorship of T. W. Mitchell. Inasmuch as most of its material is "psychoanalytic" the editors have decided to add it to the list of regularly abstracted journals. It is a quarterly and is published by the Cambridge University Press.

grips with the actual dynamic situation and is quite oblivious of Freud's modifications of the original ideas. Myers makes an amusing statement about his 1914 paper as being among the first to call attention to the importance of attacking the amnesia of these neurotic patients. One wonders if he ever knew of Breuer's—"talking out cure" (1893)—Rabelais, centuries earlier "laughing cures," and similar abreactions towards the precise mechanisms of whose understanding Freud has reduced generalities down to really scientific causalities. McDougall's contribution is quite significant of a method of attributing alien ideas to an opponent and then demolishing them. "Reliving an emotion" in Freud's psychology is quite a different thing than McDougall's statement of it. McDougall's statement re a "quantum" of energy attached to an idea is quite unfamiliar in the dynamics of the libido. The discussion is of interest as illustrative of an upper level treatment of the abreaction problem.

3. LONG, CONSTANCE. *Psychological Adaptation*.—An excellent statement of Jung's objective and subjective significance of the dream makes up the opening of this paper. Causal interpretation deals with the objective memory elements and thus reconstructs the past associative development of the patient. Subjective interpretation relates the dream elements to the feelings of the dreamer. All the rôles are special attributes of the dreamer. This is Silberer's "functional symbolism." Jung's accentuation of the projicient value of the dream—teleological function—in solving actual problems is here emphasized. Both attitudes, the analytic and the synthetic, are valuable. The individual and society must both be taken into consideration in this frame and "adaptation" is necessary for everybody. Repression is the mechanism for adjusting counterclaims. The battle is fought out in the unconscious and whether discomfort or disease appear further entail considerations of inheritance or special environmental factors. The complex is the thing to be revealed in the unconscious. Feeling tone and phantasies are associated and release comes with the opening of new adjustments. Abreaction is only a foreconscious situation. It helps in the formation of the transference. A 15th century Persian poet is quoted apropos of the abreaction situation. The need for adaptation to inner as well as to outer realities is insisted upon. Dreams and phantasies are not only objects of repression but are schemes and plans. From this attitude of mind Jung thus values the manifest content of the dream. The Vienna school is misquoted as holding that the unconscious is "the all round inferior mind" and not "the creative mind" as well—a view much reiterated by many who show their lack of acquaintance of Freud's views by quoting it. Dr. Long now takes up the question of "types." "Men are born into a type just as they are born into a family" is her dogmatic utterance. She then discusses some of Jung's

well known views about the introverted and extraverted types, and his intuitive, sensational and other formulations from this "type" aspect.

4. JONES, E. *Recent Advances in Psychoanalysis*.—This is not a general review. It is confined to a few topics. Ferenczi's "Active therapy" is first discussed. Chief stress is laid upon the keeping up the state of tension which not infrequently is relaxed through slight betterment in therapy or coming from ameliorating environmental modifications. Thus arises the "abstinence" principle of Freud, and the "prohibitions" and other "restrictions" advocated by Ferenczi to aid in getting unconscious material into the analysis. Freud's contributions to technique are also alluded to, also his study of an infantile neurosis and his neurotic types of falling ill. Under the head of Characterology Jones refers to Freud's 1908 study on anal determiners of character and also his own contribution to the same subject. Hate and anal erotism are clearly allocated and Ferenczi's study on oral—cannibalistic pregenital organization phases, touched upon. Freud's contribution to character reaction types, is well elucidated. Type 1, Richard III variety, as those wishing special privileges because of infantile injustices; Macbeth and Rosmersholm, type 2—those broken by success; and type 3, the "criminal from guilty conscience." They are not guilty because doing the forbidden thing, but rather do the forbidden in order to experience the acquiring of the sense of guilt. Freud's contributions to the psychology of love and to the taboo of virginity are also taken up.

Contributions to the very important problem of Narcissism are then dwelt upon. This intermediary stage between autoerotic and object love was a later conception of Freud's—and in its latest intensive study opens up very important ground for the understanding of homosexual inversion and perversion, hypochondria, paraphrenia, organic disease and the general psychopathology of the love impulse. Jones very clearly traces a number of important steps in the evolution of analytic research on narcissism. Abraham's 1908 paper on the return of the libido to the self in paraphrenia was an important contribution. Object libido becomes reconverted into ego libido and will not move away from the patient's phantasies. Many bizarre symptoms belong to recovery efforts. Ferenczi's paper on the "pathoneuroses" is next considered. Narcissism as seen in falling in love is seen in four settings.

- (a) Fall in love with what one is oneself.
- (b) Fall in love with what one was.
- (c) Fall in love with what one would like to be (ideal).
- (d) Fall in love with what was once a part of one's self.

Freud's study of love is very penetrating, especially as it bears on the narcissism of parents with relation to their children.

Finally Jones takes up the recent contributions to Metapsychology,

i.e., a psychology which regards every mental process from a dynamic, topographical and economical point of view. The dynamics infusing a phenomenon has always interested Freud more than its meaning. By topographical interest he means the depth of the process in conscious, preconscious or unconscious mental stratifications, and by economical he refers to the general notion of parsimony of effort on the part of psychical dynamics to get the best results with the least effort. Freud has written five essays dealing respectively with instinct, repression, the unconscious, dream theory, and the dynamics of melancholia. Jones has given an excellent epitome of these five essays.

5. READ, C. STANFORD. *The Pathogenesis of Epilepsy*.—This is a sympathetic review of the work of L. Pierce Clark upon epilepsy so well known here. Thirteen papers are referred to.

(Vol. I, No. 2, Jan. 1921)

1. MOURGUE, R. Disorders of Symbolic Thinking due to Local Lesions of the Brain. 97-124.
2. NICOLL, MAURICE. An Outline of the Idea of Rebirth in Dreams. 125-134.
3. YOUNG, JAMES. Study of Severe Case of Obsessional Neurosis. 135-143.
4. JANET, P. Psychological Tension. 144-164.
5. Critical Note on RIVERS' *Instinct and Unconscious*. Book Reviews and an abridged translation of REIK, T.: *Oedipus and the Sphinx*, 181-194 from *Imago*. Vol. VI, pt. 2.

1. MOURGUE, R. *Disorders of Symbolic Thinking and Brain Disease*. This article in French is an excellent résumé particularly of the work of Head upon Aphasia (Brain 1920) especially as Mourgue would develop a functional psychology for language and thinking rather than the older type of structural psychology. He thus draws upon the work particularly of Jackson, v. Monakow, Bergson and Pick in this excellent review. Jackson's pregnant thought that the loss in aphasia is not the real lesion, but only represents a subtraction from a whole group and hence a reduction to a set of lower functional groups is here amply illustrated, particularly as the auto-observation of Saloz has justified this situation. (See Naville's excellent study of this case. *Arch. de Psychol.* 1918). Forel's auto-observations (*Jour. f. P. u. N.* 1915) are also quoted. Forel uses Semon's terminology—commenting on the inability of "ecphoria of the engrammes" in his aphasia.

In discussing Head's ideas of "symbolic thinking" rather than of language Mourgue shows that Head's conceptions are more in line with

modern linguistic analysis than the very structurally simplistic ideas of "intelligence." Thus he maintains that Moutier's Thesis is defective from the functional point of view; "language and thinking" are not identical concepts. Words are highly complicated symbolic abstractions with many valencies interwoven into a compact evocation. F. de Saussure has shown this (1916). Decomposition of parts of the abstraction (infra-structure, de Saussure) modifies the functional capacity of the symbol (word or phrase). The result is not to be seen in the word defect (language) alone. The difficulties are far more recondite and subtle than simply a loss of intelligence—i.e., ability to use words.

Although not a contribution to psychoanalysis this interesting review is of moment.

2. NICOLL, M. *Rebirth in Dreams*.—The idea of rebirth is universal. It is constantly met with in religious symbolizations and hence its frequent reappearance in dreams. The rebirth theme is the very basis of our psychical life, Nicoll remarks. Death and resurrection are constantly appearing dynamic situations. The psyche cannot be static without suffering. This is an inner necessity however glossed. We are constantly under the necessity for breaking with the past and advancing into the future (*vide* Bergson). The dream as a dynamic expression is constantly symbolizing these phases and Nicoll insists on the myth-like parallels of various growth phases. Thus a psychological menopause may precede a biological one in women and is characterized by definite dream symbolizations, just as there are definite puberty stage dream symbolizations. These dreams of a psychological menopause Nicoll says involve the understanding and acceptance, or refusal of a new attitude; which if accepted leads to an easier life. He speaks of certain temporal epochs; 33-37 in men where cross road symbolizations are paralleled by myth formations indicative of the struggles; 28 in women—unmarried particularly—is another critical period. He gives no definite examples. He now quotes Jung—whom he has been quoting practically from the beginning. Rebirth is shown as movements towards or into the mother, according to Jung. As an incest wish this is understandable but it is not sufficient, unless the reductive method interpretation "as wish for healing" is not coupled therewith. Rituals contain much illustrative material. Nicoll here says whenever rebirth symbolizations are found, major or minor crises are taking place in the life of the patient. He gives a dream as illustrative of a rebirth dream—*He dreamt that he was on a steamer with a crowd of people. He suddenly dived over the side of the steamer and plunged into the sea. As he went down the water became warmer and warmer. At length he turned and began to come up. He reached the surface, almost bumping his head against a little empty boat. There was no steamer, but only a little boat.* Also—In the case of a

woman approaching the climacteric *she finds in her dream that she has to go somewhere she has never been before. She is taken to this place and discovers it to be a kind of Turkish bath. She is taken inside and placed in a small room not much larger than herself. The door is closed and the steamy heat gradually begins to increase. At the same time she observes that at the top of this small room there is a brilliant light. She feels she cannot stand the atmosphere and realizes suddenly that she has taken in her fur coat with her, although she was warned not to do so. She escapes.* This latter is one of the psychological menopause type, Nicoll says. "She cannot yet stand the process of rebirth; a sacrifice of the instinctual (fur coat) in favor of the intuitional (the brilliance) is the underlying theme." Nicoll gives other more complicated dreams which are all discussed in terms of various mythologies. They are too detailed to permit of abstraction. They are excellent examples of the general features of the Jung following.

3. YOUNG, JAMES. *Obsessional Neurosis*.—Analysis of a thirty-three-year-old man who developed obsessional thinking at nineteen when he became engaged. "If he returned a book borrowed from her he doubted if he had returned it." After three years of this doubting on many points the engagement ceased. Hay fever developed the next and later summers. The obsessional ideas augmented and his parents had to settle everything for him as his activities became more and more circumscribed. He was at first exempted as neurasthenic, then had 18 months in Mesopotamia, India and finally had a complete obsessional collapse. A striking symptom was the obsessive idea of passing water at all inconvenient times. If free to gratify his wish at any moment there was no compulsion. But once in the theater, or club, or church, or railway, he must urinate. Also his ideas, "he must be a success"—this was his father's philosophy. This competitive spirit entered into everything. When adequate to a situation the compulsion vanished. If a rapport was established all was O. K.—if not he had to urinate. If on a railway he could gain a toilet, it mattered little, but if not, the desire mounted until it became orgasmic and even entered into a phase of seminal ejaculation. The bladder was not emptied incontinently at any time. Urination here was the "will to power." Anticipation was evident, and the hurry is only another aspect of the "will to dominate." Naturally it frustrates itself—as the dream cited indicates. "*I am with the army. We are marching and the leading section persists in going too quickly. Eventually they are much ahead of the remainder of the column.*" He thus "keeps his hand on the throttle of the future and so dominates an event by anticipating it." Jung deals with this situation as "undifferentiated co-function in the unconscious"—hence as Young would call it "inferior function." This the author correlates with the hard materialistic family situation. Fire

and brimstone religion give rise to innumerable limiting taboos and prohibitions. His "feeling" relationships are inferior. He distrusts his feelings. He calculates rather than feels his way into life. He tries to adapt by means of thought. He must preserve his own integrity. He cannot stand pain. He has not left the parents geographically or topographically. He has learned a prudent rationalism from his father which, backed by an instinctive parent imago fixation, prevents his infantile sexuality from growing up. Thus he stays in autoerotism. In therapy how can this mass of inferior feeling be canalized and be made to function. Analysis soon showed his father fixation and his sexuality inferiority and diminished the obsessional system. Young now goes on and shows rather sharply certain of the variations of a so-called Freudian analysis from a reductive analysis in the Jung sense.

"I am playing the piano. It seems to be an unusually large one and I can play faster, better and more freely than ever before—such lightning movements."

"Associating with piano, he said that he was very fond of playing it, that he had often had recourse to it when hard pressed by obsessions, and that it called forth more feeling in him than many human relations—the piano was larger than usual both in height and compass.

"Now here is the idea of greater compass—greater range combined with greater freedom and dexterity. This is exactly what is required psychologically. The unconscious representation of the potentiality for canalization or differentiation of the crude psychological mass is what the author calls the inferior function."

He is aware that a Freudian interpretation of this dream would reduce it to a repressed masturbation complex. This is inevitable, as the Freudian system is based on the theory of sexual determinism. He is far from minimizing the part played by sexuality in this case. "I shall emphasize it later. But it must be pointed out that in the course of analysis masturbation had ceased to be an acute problem. For that reason perhaps the practice had almost ceased. Therefore, as there was no repression on which the genesis of the dream depends according to the Freudian system, I submit that the significance of this dream does not refer to the sexual history and therefore to the past, but to the psychological potentiality, and so to the future. In this connection it may be interesting to quote from a document which the patient brought about this time. Under the heading 'Particular Results of Analysis,' two extracts are as follows:

"Whilst walking along Oxford Street yesterday I experienced a feeling as though somewhere inside my brain a new hope were dawning. There was also a physical sensation as though about one square inch of material lifted. I felt this in the left side of my head."

"During the same afternoon I had a picture—a very live one—of a

thin snake stretching from the neck to the forehead under the skin. A lid opened. The head appeared and thin sunlight seemed to stream in.'

"These would appear to be insane phantasies, but I think they have validity as prognostic signs at that time. The first is an unconscious picture of the lifting of the repression. The second embodies a motif which is universal in mythology—instinctive libido under the symbol of the snake becoming active and moving towards the surface. It probably signifies that amount of energy which through analysis has been released from an unsuitable form."

"Let us now turn to the etiology of the obsessions. 'Freud came to the conclusion that obsessive processes represent the return in a distorted guise, of self-reproaches dating from childhood and buried since then until the outbreak of the malady. They always refer to active sexual performances or tendencies.' I quote from Dr. Ernest Jones' book, *Treatment of the Neuroses*. This theory of origin holds good in this case. By analysis those obsessions with a manifest sexual content were easily traced back to a specific or a typical episode of adolescent sexual life. For example, he had an obsessive fear that any woman who touched a letter which he had written after an act of masturbation would become pregnant. This made him destroy many letters from time to time. It was traced back to an early sexual misadventure which had caused him great suffering and anxiety. Many other obsessive fears, such as his being the cause of pregnancy or of being the means of transmitting disease in various ways to others, were found to have their origin in past sexual incidents.

"But the obsessions spread from the purely sexual field to a much wider field of human relations. For instance, on his way home from India he bargained with an Egyptian boy about some coins. A British comrade remarked that he was rather hard or unfair to the boy. At the same time an older Egyptian beat the boy for making such a noise. The latter ran away. A railway was near, the track of which was used by pedestrians. The patient feared that the boy might be killed by a train and that he would be responsible. This gave rise to one of the worst and most enduring obsessions he ever had. It lasted for about six months.

"What is it that determines this enlargement of the obsessive field beyond the purely sexual? According to the Freudian teaching these obsessions are the results of displacement of affect on to nonsexual themes. It follows that if all sexual repressions are brought into consciousness there should be no more obsessions of any kind whatsoever. Now in this case I think that after six months of analysis all sexual repressions had been brought into consciousness. Yet obsessions still occurred, particularly those of self-reproach, although not with such overpowering force. If he borrowed money and was not able to pay it

back because the lender was out of reach, he became quite distressed. It was as if he felt himself at the mercy of the world because he was a borrower. It was not consistent with his conscious estimate of himself as an upright citizen. His infantile power system kicked and screamed because his integrity was in danger. His rationalism cannot accept a situation which is incomplete or dubious. It is irrational for him and the principle which is common to all the obsessional ideas, whether sexual or not, is the irrational. From this point of view the obsession may be said to be due to the fact that the superior function (the rational) gets its teeth into the irrational event or possibility and will not let go. There comes a deadlock in the psyche, which monopolizes the whole of consciousness. The question may now be asked, Does it help the patient to attribute the meticulous accuracy, the tyrannical scrupulosity of the last mentioned obsession to a mechanism of sexual repression? Will such knowledge in itself suffice to release the patient from the power of the obsession? I think not. I think that this accuracy or scrupulosity with regard to money to which I have just referred is something important in itself. It is due to that attitude which embodied the crude parental philosophy. I do not think that to reduce this characteristic down to a repressed infantile anal eroticism helps to rob it of its power. I think the redemption from the distressing psychological impasse which so often occurs is through the differentiation of the inferior function of feeling. This can only be brought about by a constructive technique directed to broadening the patient's outlook and philosophy of life, which we have seen to be so limited. The differentiation of feeling proceeds hand in hand with the broadening of the basis of personality. The possibility of this broadening was indicated in the dream of the piano and the process has proceeded steadily and I think satisfactorily. His obsessions now take no organic form whatever and the intensity of the purely ideational ones is greatly diminished. He is able on many occasions to *feel* that what he fears may happen, has every right to happen, must have happened to other people, and so on. When he really *feels* this the obsession loses its force. It is significant that the unconscious has been much occupied with religion, particularly with oriental forms, the symbols being often reminiscent of his experiences in India. A short time ago he dreamt the following:

"I was in a strange house. I heard a great noise, shouting and the clanging of a bell. A big strong man wished to come in. He called out, 'I declare unto you a new religion. I can quiet you and change your present mode of life.' But I was afraid of him and he passed away."

"This dream speaks for itself. It may be that if the patient can incorporate the feeling values which are symbolized by the man of the dream he will be delivered from the tyranny of the superior function, and so cease to suffer from that God-Almightiness which has crippled his life."

4. JANET, P. *Hierarchy of Tendencies*.—Second lecture on psychological tension in French, which contains nothing of psychoanalytic interest.

(Vol. I, Parts 3 and 4, July, 1921)

1. JANET, PIERRE. *La Tension Psychologique*. 209–224.
2. FLÜGEL, J. C. On the Biological Basis of Sexual Repression and Its Sociological Significance. 225–280.
3. SMITH, W. WHATELY. Some Properties of Complex Indicators. 281–296.
4. SMITH, W. WHATELY. Relation Between Complex Indicators and the Form of the Association. 297–315.
5. CULPIN, MILLAIS. Problem of the Neurasthenic Pensioner. 316–326.
6. MITCHELL, T. W. Psychology and the Unconscious. 327–341.
7. Critical Abstract; Reviews; Current Literature.

1. JANET, P. *Oscillations of the Mental Level*.—This is the third lecture and contains much interesting speculation upon a metaphysical abstraction, i.e., the “mental level.” Just what he means by a “mental level” and as defined in terms of “psychological tension” when he speaks of the various “niveaus” of the idiot, imbecile, debile, egoist, paranoid, scientist, genius, is far from clear—since intelligence and other factors are more or less thrown pell mell into the weighing and no unitary conceptions emerge.

2. FLÜGEL, J. C. *Biological Basis of Sexual Repression and Sociological Significance*.—This is a lengthy and very valuable contribution to this most important of the many fundamental questions which have come out of psychoanalytic research.

The author's program is as follows:

- I. Introduction. The antagonism between Individuation and Genesis.
- II. The ultimate biological nature of the antagonism between Individuation and Genesis.
- III. The nature of the biological forces favoring Individuation and Genesis respectively. —
- IV. The psychological correlates and consequences of the biological tendencies to Individuation and Genesis.
- V. The nature of the psychological difficulties involved in the realization of the pressure of population upon the means of subsistence. Sociological consequences of these difficulties.
- VI. The probable sociological and psychological consequences of a more general realization of the nature and significance of the antagonism between Individuation and Genesis.
- VII. Summary.

As to section one, Flügel comments first on Freud's contribution to the outlines of the evolution of the sexual instinct and then speaks of the need for a similar thorough outlining of the main issues of the ego trends (instinct of self-preservation, or Individuation, as he, following Spencer, calls it).

The psychic dichotomy (ego trends and libido trends) has long been adopted by Freud in conformity to well-established biological principle; rather from analytic findings themselves. As to the dynamics of repression and its biological significance, Flügel would draw attention to the existence of a necessary biological antagonism between the full development of the individual and the exercise of his procreative powers—between Individuation and Genesis, to use Herbert Spencer's terms, and to develop Spencer's ideas in his *Principles of Biology*. This antagonism is of such a kind that (other things equal) the energy devoted to the life activities of the individual vary inversely with the energy devoted to the production of new individuals. Sexual repression is one of the necessary biological results of this conflict, and the psychoanalytic formulation, Ego Trends vs. Libido, should have some contributions on the biological side. Spencer's well known but mostly forgotten material is brought forth, as well as the general Darwinian theories and the ideas of Malthus, Drysdale, and others.

Individuation and genesis have always been in conflict [as well as allies.—J.] since the beginning of life, and too much of the former has always invited disaster—see the persistence of million-year-old unicellular forms as compared with excessive individuation, dinosaurs and the like—whereas there has also been an increasing capacity for Individuation at the expense of the libido, but chiefly through its repression. Genesis is always first, however, and self-preservation is not the first law of nature [in spite of man's rationalizations and humbug moralities.—J.]. Several features of the interaction of these trends are discussed by Flügel.

In section IV the author takes up the psychological counterpart of this biological interplay and accentuates the mechanism of sublimation as the balancing factor in the equation. This is Freud's well known view. Displacement of libido and economics are but two aspects of the same problem. Sexual tendencies and work interests are always locking horns, and since Genesis is the oldest "habit," has to stand the greatest stress and is a strong factor in natural selection making for persistence is advantageously repressed, *i.e.*, sublimated, but for destruction if only coming through with symptom formation (bodily, mental, or social symptom formation is meant). Here is where psychoanalysis is of service, particularly as indicating the complexities of the many thousand years of repression displacement and adaptation. The work tendencies derive much of their energy from the displaced libido which in its highest manifestations is marvelously camouflaged as to its deep sexual origins.

Under this camouflage a lot of sexual satisfaction is released, unknown as such to conscious thought. Without strong sex tendencies there can be no sublimations. Flügel discusses three factors which make it necessary for libidinous energy to be devoted to sexual purposes as well as to sublimation. One is naturally the biologically necessary reproductive act. A second is involved in protracted adolescence of the organism which allows sublimation in small amounts only and when pushed results in many disturbances, prohibitions, taboos, etc. A third posits that a "normal" sexual development and exercise are necessary conditions of a healthy mental life in general. Libido urges and sublimations are taking place at innumerable levels of human integration and are complicated interactions, especially when it is recalled that sublimation and sexuality are under one pair of opposites, antagonists. The nonreproductive elements are particularly drawn upon for individuation, but frequently slop over into autoerotic indulgences in view of the inhibitions put upon the definitely reproductive activities—hence homosexuality, etc., etc. Socialization, *i.e.*, the building up of a herd instinct, is another important activity developed clearly by Flügel. Inhibitions and numerous checks to too free sexual activity are interestingly utilized mechanisms to enhance certain gratifications; hence there arises an "art of love," which utilizes a "return of the repressed" material in a new form of greater enjoyment capacity.

Section V deals largely with Malthusian postulates, which the author strongly supports, calling attention to the neglect into which the whole matter has more or less fallen. (Compare with recent revival of Neomalthusian discussion and Birth Control movement in United States.) The unconscious opposition to the whole problem of necessary sublimation of sex activity is undoubtedly at the bottom of much of the critical attitude towards birth control and the Malthusian notions. The race is almost pathologically blind to its own future welfare in this unreasonable opposition. Flügel believes this, correlated with the blow to his narcissism which Freud showed, was so widespread. Man's vanity as a "superior ape with megalomania" as Vaihinger once characterized him, still makes him believe he is above law and hence his paramount stubbornness to accept the reality principle whenever his erotic pleasure threatens to be curtailed. Again the fatuous principle of "the Lord will provide" which is only a part of man's mother complex, is operative in his belief that somehow or other he will escape law. Hence man's supreme inaninity in his belief in "luck" and similar types of bonehead attitudes. [Wall Street, etc.—J.] The "beneficent deity" is nothing but a parent substitute in the infantile unconscious and psychoanalysis reveals its presence. Aggression against our neighbors (stealing, wars, etc.) flow out of the wish to try to avoid insight into these fundamental internal situations. Therefore the cause for man's troubles is projected upon

something else. "George did it" is the usual way of working out this parental complex. Thus incompetent political parties confiscate through faulty tax methods, etc., instead of making a going concern of great political units.

Instead of studying the nature of underlying psychological laws the rule of "passing the buck" has come to be employed. Hence the innumerable hostilities in families, in groups, in larger social units, among nations, etc. These hostile impulses under repression seek outlets in innumerable hypocrisies which undermine society in all directions. [Prohibition in America is one of these.—J.] Hence the illusions which have surrounded the causes of Universal Peace, Internationalism, etc. Flügel does not regard these ideals as unrealizable, but not until the million and one minor subversions are done away with will larger freedom come.

Flügel treats very exhaustively other factors bearing on the Malthusian postulates and concludes this section saying: "This fear of sexual pleasure apart from reproduction is beyond doubt a very fundamental aspect of human sexual inhibition, being connected both generally with the repression of the various 'partial' sex impulses and their subordination to the purposes of reproduction and more specifically (as Bleuler has emphasized) with the repression of onanism. It finds its biological justification in the fact that (as we have seen in the earlier parts of this paper) the conflict between Individuation and Genesis manifests itself not only on the economic level through the inverse relationship between numbers and individual development necessitated by a limited food supply, but also on the physiological and psychological levels by the competition of the two antagonistic processes for the available supply of vital energy. We are, however, not strictly concerned at this point with the individual and racial origins of this fear of sexual pleasure when divorced from reproduction, nor with the conditions in reality to which it may be said to correspond; consideration of which will fall more appropriately into our concluding Section. It is here sufficient to have pointed out the very important part which this fear plays in producing the inability to realise the nature of the biological and psychological factors to which the present paper is devoted."

In Section VI he goes on to say that after showing the difficulties and developments of the ultimate nature of sex repression in his preceding chapters he would turn to more speculative aspects of the future.

"Our discussion of the difficulties in the way of a full and general recognition of the biological facts underlying sexual repression and of their practical and theoretical bearings is certainly not calculated to make us expect that this recognition will necessarily occur very soon, very suddenly or very rapidly. Indeed the difficulties in question seem to be so formidable that it would not be altogether surprising if such recognition were postponed for a very lengthy period. On the other hand the follow-

ing significant facts: (a) that unwelcome scientific views, such as those of Copernicus, Darwin and Freud, have been or are being accepted by humanity; (b) that the present general trend of psychological evolution is probably towards conscious realization and control of difficult problems rather than towards blind repression; (c) that the biological conditions of sexual repression are directly connected with other biological conditions that are already generally recognized; (d) that the recognition in question holds out the possibility of bringing a higher degree of satisfaction than would otherwise be possible to some of the most powerful human impulses (through diminished work and increased sexual enjoyment) and therefore appeals strongly to the impulses in question—all these afford considerable justification for believing that the difficulties, however great, will be overcome and that some pretty general degree of recognition of the biological influences concerned will be achieved in the not too distant future. We must bear in mind moreover that the process of recognition will be immensely accelerated as soon as the economic and political implications of the biological facts become realized and adopted by any of the political leaders of the great nations."

"Supposing then such a general recognition to take place, what prospects does this open up?"

His two final sections may thus be summarized: V. A due realization of the nature and significance of the sexual inhibitions (together with their biological and economic foundations) has been prevented by a number of psychological factors, the study of which is of great importance for social psychology. Among these factors are:

- (1) An unwillingness (derived from the Narcissistic tendencies) to recognize that the human race is still subject to biological laws operative in the case of other living beings.
- (2) The idea (due ultimately to displacements of parent-love and of infantile "omnipotence of thought") that God or Nature will provide amply for all possible human needs.
- (3) The tendency (fostered by Natural Selection in the past) to regard any shortage of the necessities of existence as due to the hostile actions of our fellow men. This tendency is reinforced by the economic complexities and inequalities of modern civilization and also by a displacement of the hostile parent regarding feelings.
- (4) The repression of hostile feelings, due to socialization, leads to a failure to recognize the causes of hostility (between individuals, classes, nations or races) inherent in the pressure of population on the means of subsistence. Malthusianism is also unwelcome;
(a) because it reduces the outlets for our philanthropic tendencies;

- (b) because it tends to serve as an expression of child-hatred on the part of parents—contraception being regarded as equivalent to abortion or infanticide.
- (5) The confidence in large numbers which has been fostered by our past history and which is sometimes reinforced by a (Narcissistic) identification of Self and Country.
- (6) Unwillingness to realize the necessity for the (unpleasant) inhibition of the sexual tendencies. Connected with this are:
 - (6A) The primitive identification of the fertility of human beings with the fertility of animals and plants that serve for food.
 - (6B) The Narcissistic overemphasis of the sexual function. This (when projected on to the community) leads to a desire for a high birth rate.
 - (6C) The fear that Malthusianism may lead to the extinction of the individual family (this fear being largely due to a Narcissistic identification of the Self with the family).
- (7) An unwillingness to contemplate any divorce between Sexuality and Reproduction—this being chiefly due to the fear of removing the "natural" obstacles to sexual pleasure.

VI. A full recognition of the view here advocated (together with the implied recognition of Malthusian principles) may therefore be very long delayed; but there are reasons why it should not be indefinitely postponed. But even if recognized, appropriate action may still be delayed owing to various difficulties, *e.g.* (a) the question of how the relative fertility of various classes and nations is to be controlled (especially in the case of culturally inferior nations and classes), (b) the fear of sexual pleasure and of general mental stagnation consequent upon easier conditions of life.

But if, in spite of these difficulties, the struggle for existence is abolished as a result of adequate birth control, we may expect that a freer attitude towards sexual problems and sexual desires will result. The two aspects of the antagonism between Individuation and Genesis will however affect sexual inhibition differently. The inhibitions due to over-reproduction will be entirely removed, but the need for sublimation will remain and will continue to necessitate a considerable degree of sexual inhibition; the actual intensity of the inhibition from this source depending on a number of factors—biological, psychological and ethical in nature.

3. SMITH, WHATELY. *Properties of Complex Indicators*: A thoughtful study of the word-association test (Jung) in which he calls attention to:

- "(1) Reaction Time.
- (2) The Galvanometer Deflection of the psycho-galvanic reflex.
- (3) Disturbances in the reproduction test."

He then goes on to state, as assumptions, that:

- "(1) That complex-indicators show affective tone.
- (2) That memory is influenced by the latter.
- (3) That there are two opposite varieties of tone."

"Of these (1) was the initial assumption while (2) and (3) are not only acceptable on general grounds but also necessary deductions from my experimental results."

His own summary is as follows:

"(1) There are two quite definite, distinct and opposite varieties of affective tone, which may conveniently be called 'positive' and 'negative'; of these the former tends to promote the accession to consciousness of the ideas to which it is concomitant, or the incidence of attention upon them, while the latter produces the opposite effect.

"(2) Prolongation of reaction time alone is not a reliable complex-indicator. In a large number of cases (the whole of class TG mentioned above and part of class T) it is due to positive affective tone.

"(3) Disturbance in reproduction is by far the best complex-indicator—or, at least, the most reliable indication of negative tone; I personally regard these two expressions as synonymous.

"(4) The Galvanometer detects positive tone as well as negative and in many cases (the whole of class G) does so when the reaction time does not.

"(5) Intensity of affective tone, whether positive or negative, increases both reaction time and galvanometer deflection. In general the most positively toned words are those with too-long times and too-large deflections: next come those with too-large deflections only. Words with no complex-indicators, or with too-long times only, are mostly indifferent. Words with disturbance in the reproduction are almost invariably negatively toned. Words having too-long times and too-large deflections are, on the whole, more intensely toned, whether positively or negatively, than those having too-long times or too-large deflections only.

"(6) For quantitative work the galvanometer-deflection of the psychogalvanic reflex is markedly superior to the reaction time.

"(7) The 'resolving' power and consequently the scope and utility of the word association method is greatly increased if the galvanometer is used in addition to the reaction time. The experimenter can divide his reactions into eight classes, all possessed of quantitatively and qualitatively distinct attributes, instead of into four only.

"(8) The memory test enables us to determine the more important relative properties of these classes. It is a very laborious method and somewhat crude, but the results it yields show a remarkable concordance and it is probable that the conclusions arrived at are reliable."

4. SMITH, W. WHATELY. *Complex Indicators and Form of Association*.—A continuation of the previous paper in which after a full discussion of Jung's work he concludes:

"The success of the test and the amount of information to be gained from it must necessarily depend to a large extent on the experience of the physician. It is hardly a matter which can be reduced to a rigid formula; the conclusions drawn must rather result from a gradual process of correlating all kinds of indications given by the test with knowledge as to their import derived from various sources. The ease and certainty with which the physician can sum up his patient must be strictly limited by the extent and accuracy of this knowledge; it is all important that he should know, as precisely as possible, which indications are noteworthy and which are not."

"So far as the form of the association goes there can be no doubt, in my opinion, that the most significant characteristic is the degree of idiosyncrasy of the reaction word. Stereotypes and multiverbal reactions are the most significant of all; then come predicate forms involving an expression of personal opinion or judgment of value. Outer associations, especially those verbal forms constellated by common phrases of everyday life, are quite insignificant, though I think it probable that the true 'clang'—as opposed to the rhyme—is often a complex indicator."

"In attempting to ascertain the general tendency for stimulus words to elicit emotionally toned reactions the best guide, so far as the form of associations is concerned, is probably the percentage of inner associations, the word 'inner' being defined as I have advocated above."

5. CULPIN, MILLAIS. *The Neurasthenic Pensioner*.—An intensely practical paper by a thinking and feeling surgeon who was brought face to face with the real problems of human personality during the war. Culpin shows how the work of Roussy, Lhermitte and others while early appearing in the war was too much influenced by the superficial psychopathology of Janet. He then shows how the war neuroses and the traumatic neuroses were really similar types of reaction, and then goes on to show that only the deep psychology as revealed by analysis can thoroughly explore these cases. He discusses briefly a number of cases and finally concludes:

"(1) The deterioration that takes place in the power of the pensioner to face the realities of life.

"(2) The administrative loss of control over the individual, whose outlook may be distorted and whose neurosis is master of the situation.

"(3) The need for a pension and at the same time the need for a stimulus to recovery.

"(4) The special difficulty of the pensioner in facing the economic struggle."

6. MITCHELL, T. W. *Psychology and the Unconscious*.—A thoughtful consideration of this difficult problem, advocating the availability of the Freudian topographical and dynamic aspects of the terms, conscious, preconscious, and unconscious. "Censur" is wrongly translated Censor, instead of the dynamic "censorship," but in general the Freudian conception is adequately presented. Mitchell further discusses Jung's conception of the "Unconscious," his "personal and collective unconscious." After this he submits some of his own views as the relations of these views, their application to psychopathology, and to psychology as a science which are of value but rather difficult to present in abstract.

7. *Critical Abstract*.—Excellent abstract of Internat. Zeit. f. Ps. 1920, part III of articles by Herman and Intelligence and Depth of Thought. This is a very sincere effort to show what psychoanalysis has to contribute to the problem of "intelligence." Reik has a paper on Collective Forgetting; Groddeck an article on Wish-fulfillments in Earthly and Divine Punishments; Sokolnicka has an analysis of an Obsessional Neurosis; Freud's Preface to the Fourth Edition of his Three Contributions in which he points out:

"It deals with the opposition which this volume above all his other works has always met with. He says that although the psychoanalytic theories in regard to the Unconscious, repression, conflict, the mechanisms of symptom-formation and so on, have been more widely accepted he sees no reason to believe that the doctrines laid down in this book are less well-founded on careful and unprejudiced research than any others. Moreover the explanation of the opposition lies so close to hand. So many doctors have not the patience or the experience necessary for finding out these truths for themselves in prolonged analyses, or else the requirements of a quick cure make it impossible; and doctors who do not practise analysis are not in a position to form an opinion about that which only analysis can reveal. If mankind understood how to learn these things from the direct observation of children the 'Three Contributions' need never have been written."

"Again the emphasis in this book on the significance of the sexual element in every department of life has led to an exaggeration of the idea, so that the nonsensical reproach is common, that psychoanalysis explains 'everything' by sex. And yet Schopenhauer had previously shown clearly enough the extent to which sexuality—in the usual narrow sense—influences the life and deeds of mankind. As for the broader sense of the word sexuality, which includes those impulses which are found in children and in perverts, those who regard psychoanalysis with contempt are reminded that the divine Plato called it—Eros."

BOOK REVIEWS

PRINCIPLES OF PSYCHOTHERAPY. By Dr. Pierre Janet. New York: The Macmillan Company, 1924. Pp. 322.

This little book of Professor Janet's is a splendid statement of psychotherapy from his point of view which he has done so much to bring to the fore in a large number of publications over a series of very active years. It is divided into three parts: the first of which contains an historical summary and a criticism of many methods, both of the past and present; the second deals with the question of principles; and the third with the results of psychotherapy.

It is not necessary to undertake a definition of Professor Janet's position in the psychotherapeutic field; that is well known and already well defined, and is assumed in the present volume. It may be said that his theory of psychic tension and of depression with its three stages of sadness, laziness, and aboulia, which he brought out in his introduction to the last edition of his *Major Symptoms of Hysteria*, reviewed in *THE PSYCHOANALYTIC REVIEW*, Volume VIII, page 222, are referred to constantly in the pages of the present volume. While Professor Janet's language is still that of the academician, it should not be too critically viewed from this standpoint, as the limitations of language are difficult to overcome. He is thinking in terms of psychic force and its distribution. By "force" he understands "only the expression of a possibility of action" (p. 215). From this point of view his use of the term is quite clear. He deals with this force rather as quantity, and when quality is involved in general terms that leave much to be desired as to the individual components from the psychoanalytic point of view.

In discussing questions of the results of psychotherapy he has nothing to say about what the psychoanalysts understand by transference. If the internist, in discussing various chemical and physical therapies is blind to the psychological (psychotherapeutic) component, it may be said that Janet seems to be equally blind to the part that the physician plays as a personality. In other words, the dynamics of the transference apparently has not been grasped by the author. He talks of traumatic memories as if they were still the sole concern of psychoanalysis.

One comment which he makes seems to be worthy of special note and that is his comment on the dangers that certain treatments, to wit, psychotherapeutic treatments, may hold for the patient. He very well calls attention to the fact that any therapy that has any value must of necessity be dangerous, which is in accord with the well-known psychoanalytic theory of ambivalence, and says, very aptly, "Must arsenic be

given up because of Lacenaire's crime, or the surgeons' bistoury be dulled for fear lest they make use of it to cut their patients' throats?" His further discussion of this question of "dangers" is equally to the point.

In the second part of the book, on Principles, many of the mechanisms, which psychoanalysis has emphasized, are recognized, such as defense (p. 167), which receives recognition in various forms in his discussion of the economy involved in the fear of action and in complete rest (p. 167); regression (p. 189); the significance of forgetting (p. 195), etc.

Throughout the book his theory of psychological tension and the hierarchy of psychological functions is frequently referred to. The field of psychotherapy, however, he considers to be very much wider than as it is ordinarily thought of. He would include any means, chemical, physical, or otherwise, that modifies the mind as psychotherapeutic. A compound cathartic pill, therefore, that relieves a toxic condition producing clouding of consciousness, would be a psychotherapeutic agent.

This book is well worth reading and although from one point of view it may be disappointing to the psychoanalyst, yet from another it is quite encouraging, for it indicates that Professor Janet, while nominally an opponent of psychoanalysis, is still in some respects approaching its point of view.

MODERN THEORIES OF THE UNCONSCIOUS. By W. L. Northridge. Published by E. P. Dutton & Company, New York, 1924. Pp. 193.

This is a very good book largely from the historical point of view. It undertakes to state the various theories of the unconscious that have been held from time to time, beginning with the Greeks, running through the German school, with Leibniz, Kant, Schopenhauer, Herbart, and Hartmann, discusses Myers' theory of the subliminal self, the French school of Pierre Janet with its American derivations, Boris Sidis and Morton Prince, and coming up to the psychoanalysts, with a somewhat critical conclusion. The perspective gained by such a review is useful and instructive, although probably a good many psychoanalysts would not be altogether pleased with some of the qualifications and reservations which the author makes with reference to the psychoanalytic viewpoint, but it nevertheless is very appreciative of the work of this school. There is a rather extensive statement of Rivers' views, perhaps somewhat more extensive than a great many would think warranted. The final chapter, which is critical, rather falls down apparently because the writer has an academic viewpoint rather than one of personal and extensive contact with actual patients and their concrete problems. A real criticism of the psychoanalytic viewpoint seems almost of necessity to demand this. The author, it might be mentioned in passing, speaks of Sidis and Rivers as if they were living and also elevates Coué to an altitude much above his deserts by referring to his work and his followers as the New Nancy

school. There surely can be no parity as between Liébault and Bernheim and Coué as is implied by this name.

WHITE.

WOMEN CHARACTERS IN RICHARD WAGNER. By Louise Brink. *Nervous and Mental Monograph Series No. 37.* New York and Washington: Nervous and Mental Disease Publishing Co., 1924.

In this monograph the psychoanalytic method of investigation reveals the fundamental impulses out of which developed the artistic trends and products of Wagner's genius. In a scholarly way Dr. Brink has interpreted the rôles of the several female characters of Wagner's classic in a manner contributory not only to the better understanding of Wagner's own conflicts and identifications, but to the whole question of the behavior of psychic mechanisms in force from childhood to adult years.

In the analysis of this great variety of feminine characters particular attention has been paid to persistent family attachments, the severance of the bonds and the acceptance of new interests and relationships with emphasis on the deviation of the early love trends, which may become permanently withdrawn from the reproductive channel and later serve the separate ends of the ego.

Most of the knowledge of Wagner's life gained both in past and recent years, while valuable, is limited in this respect because it has been presented at the descriptive level. Accurate description of facts is obviously necessary to any investigation even in matters concerned with art which is so clearly a product of the unconscious, but psychoanalytic research is not satisfied to remain at the descriptive level and seeks to penetrate into the profound causes and meaning of these life forces in an attempt to bring the obscure to the light for a better understanding of character with its peculiarities. Upon such questions as the morality of the Wagnerian dramas, which are frequently misunderstood from the surface expression of the story; this and future psychoanalytic studies will cast illumination, in fact we may depend upon these studies to reveal the structure of motives and the many conflicts and contrasts which lie in the depths of nature's evolutionary scheme.

It is recognized that much remains to be accomplished along the same paths represented by this monograph, and even in the particular field covered by its contents, so this valuable attempt should be widely read with great interest not only by psychiatrists but by all who are interested in or enjoy Wagner's creations.

LEWIS.

BEYOND THE PLEASURE PRINCIPLE. By Dr. Sigmund Freud. Authorized translation from the Second German Edition, by C. J. M. Hubback. Published by Boni and Liveright. Pp. 91.

A review of the English edition of this book appeared in Volume XI, No. 1, January, 1924, of *THE PSYCHOANALYTIC REVIEW*.

WHITE.

LEARNING TO TYPEWRITE. With a Discussion of the Psychology and Pedagogy of Skill. By William F. Book, Ph.D. Published by The Gregg Publishing Co., New York, 1925. Pp. 463.

THE PSYCHOLOGY OF SKILL. With Special Reference to Its Acquisition in Typewriting. By William Frederick Book, Ph.D. Published by The Gree Publishing Company, New York, 1925. Pp. 258.

These two books belong together, the former, a discussion of the psychology and pedagogy of skill, illustrated by the learning process as applied in learnnig to typewrite, and the second, a more detailed study of the acquisition of skill in typewriting. The books have no special interest for readers of this review except as indications of how the field of practical work-a-day life is being invaded by the psychologist with his methods in the attempt to increase efficiency and to make for economy and greater happiness in the performance of our daily routine tasks.

WHITE.

CLINICAL PSYCHOLOGY. By Louis E. Bisch, M.D., Ph.D. Baltimore: Williams and Wilkins Co., 1925.

This book, which was developed from the material offered the students of Teachers College and of the Extension Courses of Columbia University, was written particularly for school teachers in order to give them an opportunity to secure a working basis which would enable them to recognize and to deal with the problems of atypical children.

Regarding Clinical Psychology as such the author makes the following comment: "Clinical Psychology is what the words imply—psychology based upon clinical experience. No person should consider himself a qualified clinical psychologist who has not had some medical training, nor should a physician qualify as such, who lacks training in psychology. That a psychologist may to best advantage work in conjunction with a physician goes without saying—one might add that this would be an ideal arrangement—yet even the physician should be versed in abnormal psychological processes (psychiatry), a study much neglected in the average medical school curriculum." He has no time for the posers, the untrained as psychological experimenters, the untrained in medicine, or for those who depend upon mental tests alone for their diagnoses.

Among the distinctive features of the book are:

- (1) It deals largely with the problems of children and very little space is devoted to adults excepting in connection with some of the psychoses which are dealt with rather lightly.
- (2) The outlined scheme for history taking and special examinations is very elaborate, covering practically all of the possibilities and emphasizing particularly some of the more important procedures.

- (3) The classification of clinical psychology based on causations compiled and arranged by the author is apparently a very useful one for the purpose of orienting the student.
- (4) The test comprising the chapter on the normal child, the precocious child and on mental retardation contains a mass of general information, which is presented under such a liberal number of captions that the desired topics are easily found.
- (5) The chapters on epilepsy and syphilis should enlighten the social worker and the teacher.
- (6) The history, methods, nature of, and discussion of the subject of mental testing occupies less space than would be expected in a book of this nature and size; however, this lack of elaboration may be overlooked, since the author is refreshingly unique in his cautious interpretation and evaluation of the facts obtained by mental testing.
- (7) Several of the eighteen illustrations show excellent examples of the abnormalities they claim to represent, but their value is extremely limited for the beginner since they bear only a title instead of descriptive legends. Some of the plates show nothing characteristic, *e.g.*, those on dementia precox and psychoneurosis, and therefore might be misleading.
- (8) There are two appendices, the first comprises short summaries of fifty-eight cases of various mental and physical disease combinations, presented principally from the standpoint of mental testing results, while the other is a comprehensive bibliography for further study, well classified under twenty-four headings most of which pertain directly or indirectly to the problems of childhood.

The book is very readable and contains information that should appeal particularly to those who have unusual or defective children in charge, and it may be read with profit by those who are interested in the establishment of habit clinics.

LEWIS.

NOTICE.—All business communications should be addressed to The Psychoanalytic Review, 3617 Tenth Street, N. W., Washington, D. C.

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